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A STUDY TO DEVELOP A TIMELINE FOR SEQUENCING THE MAJOR TRANSITIONAL TASKS IN THE FORT SILL HOSPITAL TRANSITION PLAN

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The complexity and number of major transitional tasks (MTTs) in a hospital construction project require considerable lead time for transition planning. The project manager is responsible for a coordinated transition plan to accomplish all major tasks on time and within budget. Time Line® project management software was used in the study to help sequence the MTTs and coordinate the transition planning effort. The result was a printed Gantt chart timeline which displayed all MTTs in the project schedule in start-date sequence. The project manager had the ability to visualize the schedule. The software also allowed the project manager to update the schedule as changes occurred and to immediately print the updated Gantt chart. The Gantt chart was used by the project manager as a visual means to depict the project schedule and was the basis for visual progress reports to the hospital Transition Committee. Selective reports were prepared which displayed selected subsets of MTTs for specified action officers or hospital departments. These reports made the Gantt chart an effective tool at all levels of management. Effective use of available technology can greatly aid planners and managers bring to pass an orderly and organized transition. (KR)

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A

Study to

Develop a Timeline

for Sequencing the

Major Transitional Tasks

in the Fort Sill Hospital Transition Plan

A Graduate Research Project

Submitted to the Faculty of

Baylor University

in Partial Fulfillment of the

Requirements for the Degree

of

Master of Healthcare Administration

by

Captain Keith L. Ward, SP

July 1988

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I.   INTRODUCTION

Summary of Current Conditions

The US Army Medical Department Activity at Fort Sill, Oklahoma, is replacing the current hospital with new construction. The outpatient clinics and administrative services are being replaced in Phase I. The inpatient areas and the ancillary support services will be replaced in Phase II. Currently, Phase I is under construction and Phase II is under design. An information paper for the construction project is shown at Appendix A.

The three significant milestone dates related to occupying the new outpatient building in Phase I are the Contract Completion Date, the Beneficial Occupancy Date (BOD), and the Hospital Move-In Date. The Contract Completion Date is 3 February 1989. This date is based on the contractual 877 day construction period, but may be extended if weather, unforeseen site conditions, or changes modify the contract. The BOD is 15 June 1989, when any extensions to the contract should be completed and the contractor turns the keys to the facility over to the U.S. Government. At this point, all work by the contractor is to be finished. The third date is 1 September 1989, when relocation of operations to the new facility is programmed to begin. The duration of the relocation has not yet been determined.

The period between BOD and Hospital Move-In (15 June to 1 September 1989) is the Retrofit and Transition Phase. During this period, the Medical Department Activity (MEDDAC) Transition Committee and the Health Facility Project Officer (HFPO) will

coordinate, among other things, the pre-positioning of equipment, furniture, artwork, and the completion of approved user-requested changes to the facility.

Due to the need for considerable lead time to accomplish numerous tasks, planning will have to take place far in advance of the Retrofit and Transition Phase. This planning will be broken down into as many functional activities as is necessary. Many of these activities, or major transitional tasks (MTTs), will be interrelated. The achievement of one task may be directly contingent upon the prior accomplishment of another. These tasks may then, in turn, impact on still other tasks to follow. Each MTT is composed of sub-tasks which may also have these same interrelationships. In effect, a single task may not indicate the full range of what has already been done or what remains to be accomplished. It is paramount that all tasks and sub-tasks be clearly identified as early as possible so that appropriate action can be taken on their accomplishment. This will prevent loss of time, manpower, and funds later when the lack of planning will have more critical consequences.

Problem Statement

The problem is to develop a timeline for sequencing the Major Transitional Tasks in the transition plan for the new outpatient clinic building in Phase I of the Fort Sill hospital construction project.

Objectives

These objectives provide an outline of what actually is to be done to assist the MEDDAC Transition Committee. The topic of this Graduate Research Project of necessity takes a pragmatic approach. The committee currently possesses no management tool which offers the flexibility needed for directing committee members and staff officers in the accomplishment of their responsibilities.

1. Review literature for transition planning and especially for use of computer based project management software in transition planning.

2. Compile a comprehensive list of the major transitional tasks required for planning the transition to the new Phase I facility.

3. Analyze the duration and sequence of actions required before operations can begin in the new building.

4. Determine the dependencies which exist within or between the major tasks and milestones in the transition plan.

5. Schedule Transition Committee meetings regularly to direct the transition planning effort.

6. Enter network analysis data into the computer data base using Time Line^R software to generate a Gantt chart timeline.

7. Prepare visual in-progress briefings to the Transition Committee based on the Gantt timeline charts produced by the computer program.

8. Use the output of the computer program to keep both the Transition Committee and the MEDDAC staff officers informed of progress toward accomplishment of major transitional tasks.

Criteria

Process criteria were used instead of outcome criteria in this project since the Administrative Resident would not be present for either the final stages of transition planning or for the actual transition. Therefore, the study criteria are

directed toward having the Transition Committee implement and use the Gantt chart timeline. The researcher will then assess the efficacy of the Gantt chart as a management tool in helping the Committee meet its transition planning responsibilities. Actual use of the Gantt chart by the Transition Committee is to be the objective measurement required to evaluate criteria.

1. All departments which are charged with major transitional task planning will be identified on the Gantt chart timeline to illustrate their area of responsibility.

2. The implementation of the Time Line^R model will help the chairman of the Transition Committee monitor progress in accomplishment of major transitional tasks at each committee meeting.

3. The Gantt chart timeline will be used as the basis of progress reports to the Transition Committee.

4. The Gantt chart timeline will display at least 90% of the transitional issues which are found to qualify as major transitional tasks during the period when the Time Line^R project management tool is being implemented.

Assumptions

My assumptions incorporate the necessity that all involved personnel will remain committed to comprehensive transition planning to ensure a smooth transition and eventual relocation. The assumptions are:

1. That hospital administrators will convince involved personnel to accept the change of location.

2. That all personnel will participate in making sure that it is a successful venture.

3. That key planning personnel will be stabilized through the entire transition planning process.

4. That transition funding will be provided as needed to accomplish the major transitional tasks.

Limitations

The limitations are essentially the same as those faced in any construction venture attempted by the federal government. A multiplicity of players and agencies requires close coordination for successful completion. Dependence upon agencies not under the control of the MEDDAC command group will complicate planning for some major transitional tasks and sub-tasks.

Literature Review

The literature review did not reveal any published reports related to the use of computer based project management software for a specific project. Project management software was identified as a valuable tool to help project managers accomplish their planning and control responsibilities. The proliferation of project management software makes it easier to calculate the critical path through the project and to monitor all tasks within the project. The review did clearly indicate that before beneficial occupancy can occur, extensive coordination of transition planning with operational requirements is essential. Through program analysis beginning in preconstruction planning, management determines current and future needs on which to base planning requirements.[1]

Transition and subsequent operations must be accomplished by a hospitalwide planning effort. Time and again, the literature indicates the necessity for establishing a multidisciplinary transition planning committee or team. The team's role is to define its objectives, identify its organizational structure and jurisdiction, and adopt detailed responsibilities. The team should:

1. Provide a link among planners, designers, support agencies, and users.

2. Identify problems at early stages and ensure that appropriate solutions are found.

3. Gain and maintain management support.

4. Coordinate the various interdependent activities.

5. Monitor the project schedule and be aware of delays.

6. Plan to correct deficient planning efforts.

7. Ensure that transition planning materials and manuals are prepared.

8. Ensure proper orientation of staff.

9. Ensure all involved parties provide input.[2]

It is recommended that the transition planning committee begin planning at least a year in advance, preferably earlier. If planning begins too late, important preparations such as testing new systems and procedures, training and orienting the staff to the new facility, and improving operations may be rushed or eliminated. The transition planning committee should meet biweekly until three months before the move, then weekly until two weeks before the move, and then daily for the final two weeks.[3]

It is essential for hospital staff and management to actively participate in the planning and execution of the move. Beginning operations in a new facility presents a unique opportunity for all department managers to review current operations, plan new systems, and modify existing practices to create a more effective organization. It presents an opportunity for departments to evaluate past performance and determine future needs for equipment, systems, and facilities.[4]

A myriad of details concerning the transition of services must be accomplished. An early activity upon the establishment of a Transition Plan ing Committee is the identification of all the specific tasks that are to be performed. Required tasks include the need for resources to be allocated and directed to the new site prior to the beginning of operations. Materiel, equipment, workload, and personnel considerations must be planned in advance. The actual movement of the operation will need to be thoroughly planned and coordinated to avoid delay and disruption of daily operational schedules. Small work groups within specific departments may be used to identify every conceivable task or issue. Top management will direct the process and refine the output. The key to successful transition will be thorough planning and effective project management working hand in hand with dedicated employees.[5]

Richard Plasket stated that for every ten projects underway in any company, only three are managed by effective project management techniques. But management seems to be becoming more project oriented to gain better control over the project execution. Unfortunately, the supply of trained and/or experienced project managers does not meet the demand. Untrained and inexperienced staff members are being placed in charge of projects and are finding themselves "behind schedule".[6]

Many project managers who have the foresight to seek help are turning to the large variety of computer software available. Many are seeking not only help, but solutions. Danger lies in relying upon a tool for the solution. There is not a piece of software that will "manage" the project. Only the project

manager can do that. Software programs are merely tools developed to help in the collection, storage, manipulation, and display of information. Project control still requires the marriage of technology and management technique. In order for technology to enhance the proven concepts of project management, the project methodology and requirements definition must be determined. Once this is done, the appropriate software package can be fit into the scheme.[7]

In planning a project methodology, there is a fair amount of work to be done before any software can be of help. In fact, it will be of little or no help until after the problem is defined and the tasks to be performed have been identified. The first step taken after problem definition is to identify the major tasks to be performed and then to create an action plan for each task. Specific activities are listed on each action plan. These activities may include sub-tasks, completion date, duration time, action officer, coordination requirements, funding requirements, personnel requirements, impacts from other tasks, and other tasks impacted. A task listing provides a common reference when it is used in communication with another team member. In a well developed action plan, the desired level of detail is available to foster the exchange of information.[8]

The next step in the project methodology plan addresses the timing for the beginning of each task. For a project of any size, it is usually necessary to use a more formal technique for the calculation of the critical path. Program Evaluation and Review Technique (PERT) enables managers to calculate this important management function and to identify any slack time.

Due to the complexity of learning and using the technique, many project managers avoid this step. When using project management software, however, the project manager merely provides for the input of tasks, durations and dependencies and the computer program calculates the critical path and identifies available slack time.

The next step is to get a perception of how the project measures over a period of time. It is necessary to visualize the sequence in which tasks will be performed. After the PERT calculations are finished, the results can be translated into a Gantt chart. Most managers find Gantt charts easier to understand and less threatening than PERT charts. A Gantt chart is an excellent way to display a timeline for the purpose of communication and presentation to management. Each task spans the appropriate period of time from its beginning to its end. The relationship to other tasks is readily apparent by viewing the entire Gantt chart. Tasks can be displayed in the sequence in which they will be scheduled to start. Further, milestones can be identified on the Gantt chart. Milestones are checkpoints within the schedule where the project manager can measure achievement and monitor progress. The project manager cannot afford to wait until the end of the project to find out if he is on schedule.[9]

The requirements definition will help assure that the software package selected will support the project management methodology. To decide which software package is right for a project, the requirements definition must address what the program will be required to do. The following discussion

addresses some considerations of the requirements definition.
Hardware requirements include size of memory, number of disk
drives, and other peripheral devices required. The operating
system version and level must be compatible. The size of the
project will determine how many tasks will need to be planned,
plotted, and tracked. Capabilities of programs on the market
range from 5 to over 9000 tasks. This feature has the most
effect on the price of the software package selected. Project
management software is available for mainframe computers,
minicomputers, and personal computers (PCs). These packages
range in price from $52 to $6000. The importance of the size of
units of time tracked, whether minutes or eight-hour days, will
have to be considered. Also, will the software program allow the
establishment of task dependencies? Some software packages
require tasks be fully completed before the successor task can
begin. Others allow a successor task to begin based on partial
completion of its predecessor. The ability to produce graphics
is another consideration. Modeling capabilities also must be
considered. Can tasks be inserted and altered? Can dependencies
be readjusted? Can a "what-if" scenario be modeled without
altering the prime data base? These questions must all be
addressed in the requirements definition. Additionally, project
linkage would be a consideration when there is a requirement to
link multiple projects or for very large projects consisting of
many sub-tasks. It also may be of concern to link the project
management software with other software such as spreadsheet,
statistical, or report writer programs. Most project management
packages provide only limited report formats.[10]

Once requirements are defined, it will be possible to narrow down the number of software packages which can meet the needs of the project manager. The following features will help finalize the selection of a software package which will integrate with the project methodology:

> User's manual that is "user friendly".
>
> Tutorial with sample data for learning the program.
>
> Menus for direction and assistance.
>
> On-line help to avoid constant referral to the manual.
>
> Technical support available via telephone.
>
> Demo program to provide the project manager the
>
> opportunity to "try before you buy".

No software package on the market will meet the project manager's needs perfectly. The project manager must select the package that will best meet the requirements for the project at hand. The important consideration is that there is a project management methodology defined on which to base software selection.[11]

An important activity in the transition planning process is the establishment of the tentative date for moving. This allows the development of a timetable to organize the planning process into a logical sequence. Based on this date, target dates for the beginning of each major transitional task can be established by planning backwards from the move-in date.

St. Francis Hospital in Cincinnati developed a transition schedule/calendar that was distributed throughout the hospital for coordination.[12] Flow charts have also been used to identify move dates as well as individual and departmental tasks and

responsibilities.[13] Another alternative is the use of a flip-chart to list tasks that will have to be done before, during, and after the move. The tasks are organized into specific time periods and labeled with activities that need to be done at the appropriate times.[14]

The planning process also generates a mammoth amount of paper. Consequently, a well organized filing system must be developed. Due to the need for multiple revisions in the transition plan throughout the planning process, three-ring binders were found most appropriate for one author to keep individual committee members current.[15]

It is imperative to involve as many personnel as practicable in all phases of the planning process. This not only helps to promote a positive attitude about the new facility, but also permits greater creativity. Active participants increase the probability of developing a workable and acceptable plan. The greater the number of people participating in the planning for a new work area or system, the greater the chances of having employees being aware of upcoming change, knowing why the change will occur, and being willing to accept the changes.[16]

Moving to a new facility involves much more than just relocating patients, staff, and equipment into a new building. It represents a transition to a new way of providing medical care as well as to a new place for delivering that care. It is a social phenomenon that can be either a stressful, negative experience or an exhilarating, positive experience for the hospital staff and the community. The transition plan should include orientation to provide information and to assign

individual responsibilities for the transition process.[17] A well

organized and publicized transition plan can positively affect

the staff's level of concern, chagrin, or hostility associated

with a change in location of the provision of healthcare.[18]

Planning for major change in a healthcare facility is a

complex process. Yet if fundamental management concepts and

principles are applied, the change event can be simplified and a

successful outcome ensured. In planning for a significant

change, it is essential to apply the principles of management:

planning, organizing, direction, and control.[19] Transition

efforts demand a high level of commitment and energy to ensure a

smooth and efficient transition to the new facility.

Research Methodology

This methodology will be used by the Administrative

Resident to assist the MEDDAC Transition Committee in the

achievement of the objectives previously stated:

1. Literature review will include transition plans from other military facilities as well as from published articles.

2. Based on the major transitional activities identified in the Evans Army Community Hospital Transitional Planning Packet, a list of major transitional tasks (MTTs) will be determined for this project. These MTTs will be used to plan the activities to be accomplished during our transition planning period.

3. Involve department chiefs in the Transition Committee meetings to obtain their participation in planning for current and projected operations.

4. Refine the MTTs through coordination with action officers and responsible department chiefs.

5. Time Line[R] project management software will be used to produce the Gantt chart to display the timing and sequence of the transition planning activities.

6. Further refine time lines using the computerized data as the Beneficial Occupancy Date (BOD) fluctuates.

7. Use the end product to provide progress reports on achievement of MTTs to the Transition Committee.

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[2] W.J. Drodge, "Successful Commissioning of Hospital Construction," Dimensions June 1982: 25-6.

[3] Esther Kuntz, "Hospital Moves Can Run Smoothly," Modern Healthcare Feb. 1980: 70.

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[18] Darlene J. Barnes, Patricia Harmon, and John P. Kish, "A Displacement Orientation Program," Journal of Nursing Administration July-Aug. 1986: 45.

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II. DISCUSSION

Transition Committee

At the beginning of the planning stage for Phase I of this major relocation of Reynolds Army Community Hospital at Fort Sill, Oklahoma, it was necessary to start by outlining the process. For this purpose, the Transition Committee was created to establish a multidisciplinary management team to "develop and implement transition plans for occupancy of the replacement facility for Reynolds Army Community Hospital."[1] A multidisciplinary team approach was vital. No one individual can be expected to possess the breadth of technical expertise and strategic planning experience to fully anticipate all tasks which must be undertaken and the actions required to accomplish those tasks. The first meeting of the Transition Committee was on 14 April 1987. Membership of the Transition Committee is shown at Appendix B.

First, all available resources had to be considered and reviewed by the committee to determine what techniques have been used for transition planning, either successfully or unsuccessfully. This review included articles printed in the professional journals, transition planning experiences of staff members, and review of actual written plans obtained from colleagues.

In our circumstance of managing a military health facility construction project, resources include the expertise of the Health Facility Project Officer. He is attached full-time to the on-site project office by the Health Facility Planning Agency, Office of the Surgeon General. This officer represents the

interests of the Surgeon General and the Health Facility Planning Agency. Another resource is the Nurse Project Officer who is assigned directly to the MEDDAC. This officer is also assigned full-time to the on-site project office with two primary roles. One role is to represent the interests of the user at project meetings. She is responsible for keeping the chairman of the MEDDAC Transition Committee informed of activities related to the construction project. The other role is to provide medical technical input when interacting with designers, planners, and the construction contractor.

Major Transitional Tasks

Our project, in its simplest form, is a sequence of required activities, or major transitional tasks (MTTs), that must be performed to achieve a specific goal. The goal of this and any project is to complete all tasks on schedule and within budget. Careful planning is required to set realistic timing and cost estimates, but strong management control is just as necessary to meet our goals. It is for the purpose of increasing management control that project management software was used to develop the timeline discussed in this paper.[2]

A realistic project plan is specific without being rigid.[3] Because it is the product of human planners, it must have the flexibility to handle change. The project methodology from Chapter I specifically addresses the flexibility issue. Management planners were to be involved throughout the entire transition planning process in the evolution and refinement of MTTs as change occurred. Automation was to be utilized to facilitate the anticipated changes and refinements to the plan.

The Gantt chart was the management tool selected to display the project schedule timeline for transition planning by the Transition Committee. All these considerations were to support the flexibility of the planning process.

Major transitional tasks (MTTs) are the activities which must be done for the transition to be successfully completed. The requirement to develop a number of MTTs was realized during strategic management planning undertaken to accomplish an implicit goal: to efficiently occupy and continue operations in the new facility. What the management committee did not want to do in this initial stage of planning was to overlook a major task which should have been started early in order to be completed on schedule.

In the Reynolds Army Community Hospital construction project, there are undoubtedly many major tasks to be brought to completion. The question was, how would all of them be identified to planners? Rather than starting from "scratch", a copy of the Transitional Planning Packet for Evans Army Community Hospital, Fort Carson, Colorado was obtained.

Based on the experience in the Evans Army Community Hospital construction project, major tasks which were applicable to the unique phasing requirements of the Fort Sill construction project were identified. Each was assigned to a Fort Sill MEDDAC action officer to begin planning and development of MTT Action Plans for this project. Each action officer was expected to become the expert on the subject area covered by the MTT. This staff officer is to serve as the focal point of contact within the MEDDAC for coordinating his actions and the actions of all other

staff members who have a supporting role in the accomplishment of his MTT.[4]

As a first step, the MTT itself was defined. In general, a task is classified as a Major Transitional Task based upon its having met one or more of the following criteria:

    a. The task will involve an expenditure of funds.

    b. The task will potentially impact upon manpower requirements, either by increasing or decreasing them.

    c. The task will require extensive training or orientation of personnel from throughout the MEDDAC, and will need to be accomplished prior to the Beneficial Occupancy Date (BOD).

    d. The task will require coordination among various MEDDAC elements; in some cases, no single element will have clear-cut responsibility for such coordination. In these cases, such responsibility will be assigned by the Transition Committee.[5]

The literature review helped to clarify some aspects of the MTTs. The completion of sub-tasks necessary to make each MTT happen is to be the responsibility of the middle level of management. Sub-tasks will undergo further tactical planning, as opposed to strategic planning, at this level. The sub-tasks then will be executed by the lower and middle level managers who are the technical experts in the operating departments.

The next consideration after creation of a list of major transitional tasks was to estimate the duration of each task. After the initial development of the MTT Action Plans, action officers were able to estimate the total time required for

completion of every sub-task for each MTT. Then by using backwards planning from an estimated task completion date, they were able to derive a start date for each of their tasks.

In addition to the requirement to estimate task duration was the requirement to plan the sequence of transition planning tasks. Start date was not the only factor affecting the sequence of MTTs in the project schedule. The sequence in which MTTs are to be accomplished can also be specified by establishing dependencies. To have the start of a task dependent upon the completion of another was a complicating factor that had to be continually monitored. Many of the MTTs will also be milestones which must occur on a certain date and on which the beginning of the next task will depend. These dependencies must be determined and continuously re-evaluated so that the necessary coordination may be accomplished. The problem statement of this study specifically addressed the need to manage the sequencing of MTTs in the transition plan.

To assist the MEDDAC MTT action officers in the preparation of realistic and uniform action plans, a Transition Committee Letter of Instruction (LOI) was distributed on 27 March 1987. The LOI tasked staff members with the responsibility to provide the Committee with MTT Action Plans. It described the procedures to be used for developing the MTT Action Plans for each MTT of the Fort Sill project. The instructions provided a format for use in developing the plan. (See Appendix C)

In spite of the detailed instructions and copies of actual action plans from the Fort Carson construction project, the number of variations and degree of dedication were as diverse as

the number of people assigned to develop the MTT Action Plans.
Evidently, some MTT action officers were under the impression
that the exercise was to provide input to the Nurse Project
Officer's plan. They initially failed to realize that what they
were preparing was their plan, and that the Nurse Project Officer
was only there to orchestrate the efforts of all the MEDDAC
action officers. There were other action officers who did write
comprehensive and well thought out plans.

As neither the Administrative Resident nor the Nurse Project
Officer were the subject matter experts, there was no way to
determine if the contributions had been thoughtfully developed
and applied to the Fort Sill project. One rule of thumb was that
if neither officer could make sense of it, then it was quite
possible that the officer responsible for the planning was not
correctly making use of it as a planning tool.

Another problem was that the format of the MTT Action Plan
was not conducive to change. The MTT Action Plan form
distributed with the LOI was to be placed into a typewriter and
filled out. What was lacking was the ability to easily make
changes without starting over and keying in all the correct data
as well as the changes. While updating the MTT Action Plan is
essential if no other project management tool is used to keep
planners on track, it was too inconvenient. As a result, very
few MTT Action Plans were seen to be updated as planners went
through their processes. While some good planning may have been
going on, there was not a means to keep the Transition Committee
apprised of progress in the accomplishment of tasks and sub-
tasks. This served to further underscore the need for an

automated project management tool that was conducive to change and updates.

The MTT Action Plans were submitted in their "final" form in November 1987 for review by the Transition Committee. The list of MTTs is shown at Appendix D. The MTT Action Plans indicated necessary sub-tasks in chronological sequence, stating what must be done, who must do it, and when. Lacking both updates from action officers and the ability to easily make changes, the Nurse Project Officer had each MTT Action Plan entered into word processing files. Having the MTT Action Plans automated eliminates the earlier problem of requiring too much time to update because of their inflexible format. It is now possible for MTT action officers to take advantage of the opportunity to obtain a copy of their respective MTT Action Plans, make corrections as needed, and use it as a viable tool in accomplishing their transition planning activities.

<u>Project Methodology</u>

It was next necessary to address the project methodology. The project was examined from different perspectives to determine what needs to be done, how much time was available to do it, which tasks and resources will be involved, and what is likely to go wrong. In planning the project methodology, it was determined that automation would be utilized. The Health Facility Project Office was automated with several microcomputers. Project management computer software programs were available. However, for the actual day-to-day management of the entire project schedule, there was no automated alternative in place. Manual changes in the project schedule would have required an

excessive amount of expensive administrative time to provide
frequent visual updates to the Transition Committee. This would
have been an unacceptable use of valuable personnel resources.
Lack of flexibility was the major concern with the manual
approach to project management and control.

Requirements Definition

In the development of the requirements definition,
management planners determined that the project must be
continually monitored as it progresses. As tasks begin and
others are completed, some will stay on track as planned, some
will be completed early, and others will fall behind schedule.
Some new issues may be identified which, if on the critical path,
may increase the overall duration of the project. This would
jeopardize project completion on the scheduled Hospital Move-In
Date. As timing changes are made among tasks, management must
have the ability to frequently update the schedule and produce a
graphic report which reflects current project status. By having
the ability to see at least one step ahead of the schedule, the
project manager can try to identify areas of potential concern
before they impact the project. To do this, he must have a clear
and current summary of project information with which to make
sound decisions. The software had to support this requirement.[6]

Time Line[R]

Due to the availability of the program and the fact that no
members of the management team had any preference for other
project management software, it was decided that the Time Line[R]
program would be utilized in the transition planning process to
produce the Gantt chart timeline. Hardware of adequate memory

size and configuration was available to operate the program.
Internal hard disk drives were already installed to facilitate
the loading and storage of a program which would potentially be
heavily used. Time Line^R has the capability to produce graphic
reports of good quality. Tasks can be altered and inserted to
update the schedule. Modeling can be performed by utilizing the
"what-if" features of the program. For example, if the BOD is
advanced two months, the report will be able to show which tasks
will be affected and which will therefore require management
attention. The number of MTTs had already been determined based
on the review of the Evans Army Community Hospital Transitional
Planning Packet. Subsequent development of MTT Action Plans
tailored to the Fort Sill site had established the number of MTTs
to be well within the capacity of the program selected.
Essentially, Time Line^R had the necessary features to perform
the functions discussed in the requirements definition.
Additionally, the program was user friendly and produced the
desired Gantt chart timeline in an easily understood format to
assist the Transition Committee in its planning and control.

Time Line^R is a project management and time scheduling
software program that can help the project manager keep track of
project tasks. The project is composed of a variety of tasks
that can overlap each other, precede or follow one another, or
occur simultaneously. The program also keeps track of milestone
events such as the Contract Completion Date, the Beneficial
Occupancy Date,and the Hospital Move-In Date that are scheduled
in advance to occur on a specified day. It generates a project

schedule of tasks and milestones from which it can produce a variety of written reports.[7]

Time Line[R] takes into account any required task starting dates, the planned duration of activities, the required sequence of activities, which tasks are on the critical path for on-time completion of the project, and who is working on what task. The project manager can always change information about tasks or events. This is done whenever conditions change, when different resources are assigned to work on different tasks, or when the manager wants to determine whether tasks are scheduled, started, or done. Whenever a change is entered into the data base, Time Line[R] automatically recomputes the entire schedule. If changes or delays create a conflict within the schedule, Time Line[R] prompts the project manager that the conflict exists. Once alerted, the project manager can take the necessary corrective action. These features of Time Line[R] reduce the burden of tedious detail and allow the project manager to more effectively control the schedule and keep it free of conflicts.

If the possibility of linkage with other software is to be a future consideration, Time Line[R] is also specifically compatible with the following software applications:

dBase II[R] and III[R]

Lotus 1-2-3[R]

Printworks[R]

ProKey[R]

SideKick[R]

Sideways[R]

SuperCalc3[R]

Dependencies

In creating project schedules, there are instances where one task has to be completed before another task can begin. This situation represents a dependency. To illustrate the concept of the dependency, if "Dinner" was considered a project, the tasks involved would be 1) buy groceries 2) prepare the meal 3) serve the meal, and 4) eat the meal. The order in which each task is performed is important, because each task is contingent upon completion of one or more previous tasks. One cannot prepare the meal until the groceries are purchased. These dependencies can exist in the project schedule either between tasks or between tasks and milestones and are accommodated by the computer software. Time Line[R] has the capability to form both dependencies and partial dependencies. Each task in the project schedule was able to reflect as many *dependencies* as necessary to show its true relationship to other tasks in the schedule.[8]

Project Environment

The first step was to begin the preparation for the keyboard input necessary to create the project schedule. The project environment was established before the actual data entry was begun. The project environment sets the stage and defines the working conditions of the project within the computer. Just as the preparation of an outline helps in the organization of a complex document, the process of defining the project environment serves as a catalyst in revealing areas of the project which need to be considered in planning the project schedule. Development of the project environment established the parameters within which the chairman of the Transition Committee, as project

manager, utilized the capabilities of the computer software in the accomplishment of the planning and control functions of management.

The Schedule Form was the first screen presented in the establishment of the project environment. This is where the project manager named the schedule and specified the data storage conditions. If so specified, Time Line[R] retains up to five previous versions of the schedule in the file archives. As each update session is saved to the disk, it replaces the most recent archive file and so on for however many archive files are specified. The oldest archive file is then dropped from the disk unless renamed and saved under a new name. Additionally, this entry form provided a place for the schedule name and the project managers name.[9] This is the identifying information that appears in the upper left corner of the Gantt chart printout.

The Project Calendar was used to establish the time framework in which Time Line[R] scheduled tasks. For example, the Days Form was used to specify work days and days off such as weekends and holidays. The Hours Form was used to identify the normal working hours on the days specified for work. The Calendar Form translated the duration of any task expressed in days, weeks, or months to the equivalent number of hours. This form also allowed the project manager to specify the scheduling precision from a minimum of one hour to a maximum of one minute. The minimum precision selection of hours was used in this project.[10]

The Resource/Cost Form allows the project manager to define resources as individuals, teams, or pieces of equipment. Time

Line^R will keep track of which resource is working on each task and can show when and how fully each resource is scheduled. Time Line^R will continually monitor the allocation of resources and alert the project manager whenever a resource has been overscheduled. If desired, it will also automatically reschedule tasks to avoid these conflicts.[11]

Time Line^R provided several choices about how it computes and displays schedules. The Options Form allows the project manager to determine the order in which tasks are listed on the schedule. Tasks can be displayed in start date sequence, alphabetically by task name sequence, or alphabetically either by the name of the individual responsible or by key words listed in the notes field. Our tasks were placed in start date sequence to facilitate use of the Gantt chart.[12]

The Display Control Form provided several options that were used to design the format of the screen display and the printed Gantt chart reports.[13]

Project Schedule

Faced with the need to portray a visual summary of all the elements of the transition plan, it was necessary to collate MTT Action Plans into one manageable project schedule. The large project schedule required analysis 1) to determine if there were any action officers who were having difficulty with the planning concept, and 2) to provide a means for the Transition Committee to see the entire project schedule in a single document, and 3) to establish a means to provide progress checks to the Transition Committee so that members would be able to fulfill their

management responsibilities and bring the transition plan to a
successful completion.

The Task Entry Form was used to build the project schedule
after the previously mentioned forms had been used to set the
parameters of the project environment. The Task Entry Form was
used both to add tasks and to modify existing tasks that required
revision. The task must be given a unique name of up to thirty
characters. Then the task must be designated either Fixed, As
Soon As Possible (ASAP), As Late As Possible (ALAP), or Span. A
Fixed task reflects an activity that occurs at a set date and
time. An ASAP task begins immediately upon the completion of
another task, while an ALAP task completes just before the start
of another task. A Span task bridges the time between two tasks.
To identify the task type required, the event that triggers the
start of the task is determined. The starting and ending date
and time must be provided for Fixed tasks. The time segments
that can be specified are minutes, hours, days, weeks, or months.
The current status of the task must next be provided, whether
Future, Started, or Done. There are notes fields that can be
used to keep miscellaneous notes for the project manager. Time
Line's[R] sorting and filtering capabilities can also search
through the notes field to customize the task list sequence or to
isolate a subset of the schedule based on shared attributes. In
the resource field, the responsible department or person can be
named. This name will also be displayed on the schedule and on
reports to identify the department or individual responsible for
the accomplishment of the task.

In its initial development, the project schedule was built

around a framework of known dates. The first tasks entered were the fixed milestone dates and periods. These were the:

Period	Duration
Construction Period	present - 3 Feb 89
Contract Completion Date	3 Feb 89
Contract Growth Period	3 Feb 89 - 15 Jun 89
Beneficial Occupancy Date	15 Jun 89
Retrofit/Transition Period	15 Jun 89 - 1 Sep 89
Hospital Move-In Date	1 Sep 89

After the fixed milestone dates and periods were entered, their relationships to each other had to be established. Since a schedule requires a group of related tasks to be performed in a defined sequence, that sequence was maintained by setting dependencies. It was convenient to establish the dependency and then let the computer remember which tasks are joined and the order in which they are joined. When the dependency is established between the Construction Period and the Contract Completion Date, no matter how the end of the Construction Period fluctuates, the Contract Completion Date will remain tied to it. The software will also maintain the sequence established in the dependency. This allows the use of the "what-if" scenario to see what will happen in the transition planning if the end of the Construction Period is contractually modified. By establishing dependencies in like manner, the Contract Growth Period was programmed to follow the Contract Completion Date, the Beneficial Occupancy Date follows the end of the Contract Growth Period, the Retrofit/Transition Period follows the BOD, and the Hospital Move-In Date follows the Retrofit/Transition Period. These

relationships will be maintained within the computer regardless of the dates on which the events actually happen.

As tasks were entered in the project schedule, they were automatically sequenced by start date. Tasks scheduled as soon as possible (ASAP) would begin immediately unless a dependency tied them to a fixed predecessor. If the predecessor was scheduled to happen later in the project schedule, then the ASAP task's start date was adjusted accordingly. The new start date would be based on task duration, as previously determined from the MTT Action Plan, and now counted from the end of its predecessor. The task would appear on the Gantt chart with the correct start date based on the dependency.

Tasks scheduled to begin as late as possible (ALAP) in the project schedule were built backwards from the estimated Hospital Move-In Date, using the calculated duration from the MTT Action Plan, unless a dependency was established. When a dependency existed, ALAP tasks appeared in the schedule immediately before the successor task to which it was tied. This method results in a schedule that tells the project manager when the project must be started to complete on time. If an ALAP task's successor is a fixed task that is delayed, the conflict will also delay the start of the ALAP task. Ultimately, this would delay Hospital Move-In until the situation was corrected and all affected MTTs were completed.

PERT Chart

There are several ways in which Time Line[R] can be used to help the project manager perform the control function of management. In Time Line[R], a PERT chart is created to provide one

means to review the project schedule and the dependencies among tasks. The Time Line[R] PERT chart is shown at Appendix E. This chart was not used by the Transition Committee due to its bulk and complexity. The PERT chart is useful for examining interrelationships among tasks, but it did not present the schedule in a timeline format. The intention of this research was to use a timeline as a communication and visual presentation tool that would be easily produced and understood by all affected individuals.

Macro Gantt Chart

The computer software utilized the data to create the Gantt chart shown at Appendix F. The name of the schedule and the project manager are listed at the top with the current date and file name. A vertical dotted line is drawn to correspond with the current date for purposes of analysis. This Gantt chart timeline combines all tasks and milestones to provide a macro view of the complete project schedule. The Gantt chart timeline provides the chairman of the Transition Committee with a management tool to monitor and control the transition planning process. It is also used as a means of communication to provide information to planners and action officers at all levels about the status of the transition planning effort. The format of the Gantt chart timeline was well accepted by the Transition Committee members and the action officers.

Some special features of Time Line[R] which can be used to change the format of the display will be discussed in the following paragraphs. Dependencies were used to fix the sequence of milestones and fixed periods in the beginning of the project

schedule creation process. It was also useful to establish
dependencies within an MTT on the schedule. For example, the
procurement of furniture was broken down into three separate
lines on the Gantt chart. MTT 35A is the purchase of furniture.
It must precede MTT 35B, which is the shipment of the furniture.
The dependency was established to maintain this sequence.
Likewise, MTT 35C is the delivery of the furniture into the newly
completed building. Delivery must follow both the furniture
shipment and the Beneficial Occupancy Date. Accordingly, the
dependencies are set for MTT 35C (furniture delivery) to follow
both MTT 35B (furniture shipment) and the Beneficial Occupancy
Date.

Filtering

One of the most dramatic display changes was created using
the filtering feature. The key word "IMO", for Information
Management Officer, was specified in the resource field of the
Task Entry Form for all tasks assigned to the IMO. When the
macro schedule was filtered by this key word, the selected tasks
for which the IMO is responsible were highlighted on the screen.
All other tasks were temporarily hidden to print a selective
Gantt chart report which contained only those tasks associated
with that key word. At Appendix G, all the tasks of the project
schedule have been filtered to produce a selective report which
displays only the sub-set of MTTs for which the Information
Management Officer is directly responsible. This Gantt chart
allowed the Information Manager to tell at a glance which tasks
out of the entire schedule are his responsibility. Use of this
feature required that the appropriate information be entered on

the Task Entry Form so that filtering could be accomplished at any time desired.

Even though each task in the project represented a separately defined activity, the key word "IMO" was the common attribute. Time Line[R] allows the project manager to use key words to represent an action officer, name of the department chief, or title of the department responsible for action. Most commonly, tasks were grouped under the responsibility of a single individual or operating department. Examples are the IMO, RMD (Resource Management Division), Personnel, Logistics Division, etcetera, as seen in the "Who" column on the Gantt chart at Appendix F. Once the information is entered into the project schedule, the capabilities of the software will provide the option to display or print any desired selective report.

Another option, seen at Appendix H, provided a selective report which summarized all MTTs for which the Chief of Logistics had any responsibility at all, either direct or supporting. This report was made possible by filtering all MTTs in the macro project schedule for the name "Canella" in the notes field. His direct role as well as his supporting role had to have been established in the initial planning stages when the MTT Action Plans were being developed. Because the information was entered on the Task Entry Form as the tasks were being created, it was available when needed to produce the selective report. This further supports the dictum to plan in advance. It was essential to know the capability of the software and to have the project methodology planned out to provide for data entry that would provide for the most effective use of automation technology.

Micro Gantt Chart

Another aspect in the preparation of selective reports was the approach from the micro view. Just as each MTT of the overall project schedule can be thought of as a sub-task for the project manager, within each MTT there are a number of sub-tasks which constitute a project on a smaller scale for the MTT action officer. In this study, a separate project schedule was created using each of the sub-tasks identified in the MTT Action Plan as a task in the new schedule. This was done for each MTT that was assigned to the Logistics Division. Each branch chief who was an MTT action officer received a Gantt chart for each of his MTTs, complete with milestones and sub-tasks to accomplish. Appendix I shows the Gantt charts created for each of the branches within the Logistics Division. This provided the branch chiefs a tool to help in the performance of effective transition planning and in the accomplishment of the MTT.

Appendix J shows the result of using the Time Line[R] "Combine" function on the micro schedule of MTTs assigned to the branch chiefs of the Logistics Division. Using the "Combine" function produced Gantt charts which incorporated the sub-tasks from each individual's assigned MTTs. This provided each branch chief with his own one-page summary of all sub-tasks for which he was responsible and the date sequence in which they must be accomplished. While this conglomeration rapidly becomes complex with multiple MTTs, it shows how the features of Time Line[R] can be used by project managers at any level of transition planning in an effort to achieve the best possible results.

Status Report

The Time Line[R] Status Report provides a quick glance at all tasks which are either continuing or are to start in the current week. (See Appendix K) The report also specifies whether the task is on the critical path or if slack time is present. This report is a short report which provides the project manager a lot of information on only one page. Due to the time constraints placed on executive level managers, quite often the one page summary is all that will be found acceptable. Progress reports are obtained from MTT action officers using the Status Report and the MTT Monthly Progress Report shown at Appendix L. Shortly before a monthly Transition Committee meeting, each MTT action officer receives a Status Report attached to a blank copy of the Monthly Progress Report. This officer responds in writing to provide a progress report to the Committee. The procedure is repeated each month to provide an opportunity for action officers to explain corrective actions being taken and the results of those actions. The process is repeated monthly to accommodate MTTs which reach their start dates during the time between Transition Committee meetings.

Comments

A strong capability of the Time Line[R] program is the ability to use the "what if" feature. The Transition Committee has the opportunity to see how actual or anticipated changes affect the planned schedule. The Committee then can develop, test, or apply new solutions. This capability permits the project manager to avoid "crisis management" and to formulate

viable solutions to potential conflict within the project schedule.

In this project, it was known that the BOD is dependent upon too many variables to be expected to happen exactly on the date planned. Weather and performance of the contractor are two major variables which will affect the actual occurrence of the BOD. Those tasks which are dependent upon the BOD, and can not begin until actual BOD has occurred, were tied to the BOD once in the project schedule. They will remain tied unless changed on purpose. A very good chance exists that the Contract Growth Period will be shorter than planned due to fewer weather delays than expected and due to the excellent performance of the contractor. This situation will affect the timing of the BOD due to the dependency which has been established. As this milestone date changes and is entered into the project schedule, the schedule will automatically be recalculated to provide immediate printed results of the effects of the change. The project manager will be able to intensively manage any effort which is adversely affected by the date changes.

Notes

[1] New Hospital Transition Manual, Reynolds Army Community Hospital, Fort Sill, Oklahoma, 3 Apr. 1987: 4-2 - 4-3.

[2] Andrew Layman, Time Line Manual, computer software, Breakthrough Software 1985: 21.

[3] Layman, Time Line Manual 10.

[4] Transitional Planning Packet, Evans Army Community Hospital, Fort Carson, Colorado, 20 Dec. 1984: Tab G.

[5] New Hospital Transition Manual 4-2.

[6] Layman, Time Line Manual 21.

[7] Layman, Time Line Manual 8.

[8] Layman, Time Line Manual 93.

[9] Layman, Time Line Manual 48.

[10] Layman, Time Line Manual 57.

[11] Layman, Time Line Manual 63.

[12] Layman, Time Line Manual 105.

[13] Layman, Time Line Manual 12.

III.   CONCLUSION

Problem Statement

A timeline was developed for management use in sequencing the Major Transitional Tasks in the transition plan for the new outpatient clinic building in Phase I of the Fort Sill hospital construction project. The timeline developed was a Gantt chart which was produced by Time Line[R] computer software. It met the established criteria by being implemented and used by the Transition Committee in transition planning. The Gantt chart identified all the departments responsible for action. It further displayed all the transitional planning issues which were found to qualify as MTTs during implementation of this computer based project management tool.

Specialized reports were produced which highlighted areas of concern or interest. Further management actions can now take place as appropriate. These features are helpful for the project manager or any department chief who must coordinate his staff or oversee their progress as part of the responsibility to allocate limited resources wisely.

One of the criteria for success of this project was the use of the Gantt chart timeline by the Transition Committee. This project management tool has been incorporated in the transition planning process as shown by the committee agenda and minutes shown at Appendix M. The recorder of the Transition Committee has introduced the MTT Timeline as an agenda item to provide the committee an updated Gantt chart at each monthly meeting. This Gantt chart indicates the current date with the vertical line and shows the sequence of tasks started, tasks completed, and tasks

scheduled to start soon. (See Appendix F) She additionally provides a copy of the Status Report to summarize tasks scheduled in the current week. (See Appendix K) This is the same Status Report that is distributed with a blank MTT Monthly Progress Report (shown at Appendix L) to each individual who has responsibility for a task which should be started. The written Monthly Progress Reports are being reported at each Transition Committee meeting. For tasks which are behind schedule, it remains the prerogative of the project manager, as chairman of the Transition Committee, to approach the action officer or department chief in whatever manner necessary to satisfy himself that the action officer is accomplishing his goals and/or can be referred to the resource that can put him on the right track.

Successful implementation of the research project was shown by the use of the Gantt timeline charts by the Transition Committee to assess progress in the accomplishment of the MTTs. This allowed committee members and action officers to be prepared in advance for imminent milestone dates or task start dates. The Gantt charts produced were also used at Committee meetings to inform the group of the state of progress achieved to date. It was possible to identify late starts at a glance. Any effects of the late start on other tasks or sub-tasks was either apparent or could be postulated. Action officers briefed the group on their individual tasks and were able to collectively share information about how tasks are affected by other tasks. Additionally, tasks which were soon to begin were easily identified and it was possible to begin necessary coordination without confusion.

An additional period of time equal to 20 percent of the

initial contract duration had been estimated in the project schedule by the Corps of Engineers. This time was expected to be necessary to accommodate contract modifications and weather delays. It is on this estimate that the 15 June 1989 BOD is based. To date, little of that estimated time has been required. If there is a change in BOD, either forward or backward in time, the flexibility of the management tool will facilitate the update of the computer data base. Once updated, it is an easy matter to print another Gantt chart for timely notification of transition planning personnel. Obviously, if the BOD is rescheduled to an earlier time, planning will have to be accelerated so that tasks can be started sooner than had been originally planned. It was not yet known at the time of this writing when the BOD will actually occur. Use of the Gantt timeline charts will greatly improve the coordination of the activities and responsibilities of the Transition Committee as the BOD is adjusted.

The construction project was not yet completed at the end of the study period. However, practical use of the features of Time Line[R] has been firmly established and has been accepted by the members of the commmittee. It can only be inferred from the precedent already set that the Chairman of the Transition Committee will continue to use the features of Time Line[R] to help him in the control of the personnel resources responsible for the transition planning process.

The question remains if this feature was of more value than any alternatives. At the beginning of the transition planning process, there were a number of major tasks to accomplish. Some tasks stood alone, but many tasks were dependent upon other tasks

for their successful completion. There was no single schedule to tie them together into a comprehensive project plan, whether manual or automated. There was no mechanism to coordinate the activities of all the officers within the MEDDAC who had special functions to perform in order to make the transition plan successful. There was also no centralized control mechanism to inform the Transition Committee of success or failure in the timely completion of MTTs. It was necessary to determine whether to develop a timeline, calendar, flow chart, or flip chart to evaluate progress. Any other timeline or management tool to measure the progress of action officers would have been drawn manually. Updates or changes in the project schedule then would have required the entire timeline to be redrawn. The result would be an excessive use of management time which could have been put to better use. The Gantt charts efficiently used managerial time and facilitated management control within the transition planning process and in the evolution of the project schedule.

Strengths

The strength of Time Line^R lies in the ability to update the project schedule and produce written reports which reflect the change. The new schedule can rapidly be disseminated to affected personnel. Change will be inevitable within the framework of this coordinated planning effort. The dynamics of interpersonal relations will inevitably lead to conflict and compromise. Plans will have to be changed to accommodate another person's input. The uncertainty of the actual BOD also requires a project management tool with the flexibility of Time Line^R.

Weaknesses

One possible weakness of Time Line[R] is that it may be so heavily relied upon that the creativity of an action officer is suppressed. Individuals responsible for the accomplishment of MTTs should continually review their responsibilities. Failure to anticipate an action that should be occurring at the present time could have serious consequences on the transition planning process. Risk is involved in waiting for an event on the timeline to happen. Action officers should be looking for the opportunity to make something happen rather than waiting for something to happen. This proactive attitude should be adopted at all levels of management. The framework of the entire transition planning effort is continually subject to change due to the dynamics of transition planning.

Summary

This writer feels that the computer generated Gantt chart can be applied within the transition planning process at other construction project sites. I feel that its efficacy and flexibility have been satisfactorily demonstrated. The Time Line[R] program would allow a project manager in any project the flexibility to manage the planning process, whatever the personal management style. A micro-manager can generate a multiplicity of reports to use in checking project status. Another type of manager can merely check to see that a timeline exists by looking at the Gantt chart. A wide range of detail is available through use of this project management tool for a project manager to keep informed and provide effective control over the planning process.

The opportunity exists for lower and middle level managers

to become involved in transition planning. When these personnel become involved, the benefit is twofold. They are going to be more committed to supporting policies for which they played a part in the early planning stages. Also, they will gain valuable experience which can be used within the organization in the future. Participative management techniques are not only conducive to job satisfaction and morale. Having the technical expert included in the planning process will facilitate a comprehensive planning effort. This range of planning responsibility emphasizes the importance of including in the initial planning stages all levels of management that will be responsible for bringing the action to pass.

Effective use of current technology will greatly aid planners and managers in bringing to pass an orderly and organized transition. This cannot but help make it a positive experience and one which will be emulated by other managers who are looking for a more effective way to direct and control a transition planning effort.

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APPENDIX A

Fort Sill Hospital Project Information Paper

INFORMATION PAPER

SUBJECT: Fort Sill Hospital Project

1. Purpose. To provide information concerning the subject construction project.

2. Facts.

    a. The replacement facility is being built for several reasons, to include:

        (1) Increasing the size; the existing hospital is too small.
        (2) Satisfying current hospital accreditation standards (JCAHCO).
        (3) Providing acceptable fire, electrical, and mechanical requirements.
        (4) Meeting structural needs for earthquake resistance.

    b. The new facility is scheduled to be completed in two phases:

        (1) Phase I is an FY 86 Outpatient Services Building.
        (2) Phase II is an FY 90 Hospital consisting of an Ancillary Support Building and an Inpatient Tower.

    c. The entire facility will be built and equipped using congressional funds (MCA) of the following approximate amounts:

Phase I	$ 27.8 million	
Phase II	54.2 "	(Current Estimate)
Equipment/Furniture	18.8	
Total	$100.8 million	

    d. Phase I Outpatient Services Building will be two stories high above ground, and will house the Outpatient Clinics, Logistics, Outpatient Pharmacy, Outpatient Records, and MEDDAC Headquarters. It will take about 26 months to complete, and should be ready for use in Fall 89.

    e. Phase II Ancillary Building and Inpatient Tower will be three floors above ground, and will include PAD, Inpatient Pharmacy, Lab, X-Ray, ER, Dental Clinic, Dining Facility, the ORs, Labor and Delivery, and the Nursing Units. Construction is expected to take 42 months; if money is allocated in FY 90, these buildings should be available in early 1994.

    f. The number of inpatient beds in the new hospital will remain close to the current operating level of 157. However, total square footage at the end of the project will be 514,000, as opposed to the existing 197,000.

MAJ M. Forsythe/1-5315

APPENDIX B

Transition Committee Membership

MEMBERSHIP OF THE TRANSITION COMMITTEE

Deputy Commander for Administration - Chairperson

Deputy Commander for Clinical Services

Chief, Department of Nursing

Chief, Clinical Support Division

Chief, Resource Management Division

Chief, Health Facility Project Office

Chief, Logistics Division

Nurse Project Officer - Recorder

APPENDIX C

MTT Action Plan Format

SUBJECT: NTT Action Plan for NTT # _____:_____

Target Date for Completion: _____

NTT Duration(# of days): _____

Page ____ of ____

SUBTASK NUMBER	SUBTASK DESCRIPTION	TARGET DATE	DURATION TIME	ACTION POC	FUNDING REQMT'S	PERSONNEL REQMT'S	IMPACT ON NTT'S	IMPACTED ON BY NTT'S	REMARKS

APPENDIX D

List of Major Transitional Tasks

MAJOR TRANSITIONAL TASKS

Task Number	Task Description
1.	Key Control
2.	Deleted
3.	Physical Security
4.	Revise Emergency Preparedness Plan (EPP)
5.	Deleted
6.	Movement of Skills Qualification Training Lab
7.	Equipment/Systems Training
8.	Deleted
9.	Fire/Safety Plan
10.	Deleted
11.	Ash Cans
12.	Fire Extinguishers
13.	Parking
14.	Shuttle Bus
15.	Deleted
16A.	Equipment Turn-In (Started)
16B.	Equipment Turn-In (Completed)
17.	Redistribution of Excess Equipment
18.	Placement of New Equipment
19.	Log Cat C Equipment Acquisition
20.	Special Equipment Relocation
21.	Administrative Shuttle
22.	Maintenance Contract
23.	Deleted
24.	Materiel Distribution System (MDS)
25.	Equipment/Systems Testing
26.	Deleted
27.	Linen Distribution
28.	Vending Machines
29.	To Be Completed
30.	Patient Information Booklet
31.	Publicity Program
32.	Update Policies and Standing Operating Procedures
33.	Dedication Ceremony
34.	Signage Placement
35A.	Furniture (Buy)
35B.	Furniture (Ship)
35C.	Furniture (Delivery)
36.	Artwork Oklahoma
37.	Artwork Generic
38.	Patient Representative/Information Desk
39.	Patient Appointment System
40.	Red Cross
41.	CAPOC
42.	Drug Distribution
43.	Pharmacy Stockage
44.	Morgue Operations

MAJOR TRANSITIONAL TASKS

Task Number	Task Description
45.	Specimen Collection Station
46A.	Infectious Waste Management
46B.	Infectious Waste Equipment
47.	Transition Staffing
48.	Transition Funding
49.	Space Allocation in the Old Hospital
50.	Space Allocation in the New Hospital
51.	Personnel Stabilization
52.	Bulletin Boards
53.	Deleted
54.	Patient Distress System
55.	Public Address System
56.	Telephone System
57.	Facsimile System
58.	Hospital Music
59.	Automated Data Processing (ADP) Equipment
60.	Closed Circuit Television
61.	Beeper Paging System
62.	Deleted
63.	Deleted
64.	Post Coordination Requirements

APPENDIX E

PERT Chart

Schedule Name: Reynolds Army Comm. Hospital Phase I Transition Plan
Project Manager: CPT Ward 1-2915 / 3206
As of date: 5-Jul-88 5:10pm   Schedule File: C:\TLDATA\RACH1GRF

```
                                                    87                                88                                        89
                                                Mar Apr May Jun  Jul Aug Sep  Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  Feb Mar  Apr
                                     Who    Status 2   1   1   1    1   3   1    1   2   1   4   1   1    1   2   1   1   1
Construction Period                          C  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
57. Facsimile System                 IMO     C    ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
48. Transition Funding               RMD          +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
51. Personnel Stabilization          Personnel  D    .   .   ===================================================       .
52. Bulletin Boards                  Personnel       .   .   .   ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
49. Space Alloc Old Hospital         RMD      D      .   .   .   =========================       .   .   .   .
50. Space Alloc New Hospital         RMD      D      .   .   .   ==============================   .   .   .
47. Transition Staffing              RMD             .   .   .   +++++++++++++++++++++++++++++++++++++++++++++++++++++
28. Vending Machines                 Logistics C     .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++++++++++++
45. Specimen Collection Sta.         Pathology C     .   .   .   .   ++++++++++++++++++++++++++++++++++++++++++++++++++++
56. Telephone System                 IMO      C     .   .   .   .   ++++++++++++++++++++++++++++++++++++++++++++++++++++
61. Beeper System                    IMO      C     .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++++++++
21. Special Equip Relocation         Logistics       .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++++++
18. Placement New Equipment          Logistics C     .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++++++
64. Post Requirements                DCA             .   .   .   .   .   ++++++++++++++++++++++++++++++++++++++++++++++++
35A. Furniture (Buy)                 HPPO            .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++
19. LCG Cat C Equipment              Logistics       .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++
12. Fire Extinguishers               Safety   C     .   .   .   .   .   .   .+++++++++++++++++++++++++++++++++++++++++++
36. Artwork Oklahoma                 DCA             .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++
37. Artwork Generic                  HPPO     C     .   .   .   .   .   .   .+++++++++++++++++++++++++++++++++++++++++++
59. ADP System                       IMO            .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++
31. Administrative Shuttle           IMO            .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++
30. Physical Security                POT&S    C     .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++++
22. Maintenance Contract             Logistics       .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++++
46A. Infectious Waste                Prev Med         .   .   .   .   .   .   +++++++++++++++++++++++++++++++++
16A. Equipment Turn In               Logistics       .   .   .   .   .   .   ++++++++++++++++++++++++++++++++
55. P A System                       IMO            .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++
60. Closed Circuit TV                IMO      C     .   .   .   .   .   .   .+++++++++++++++++++++++++++++++++++
58. Hospital Music                   IMO            .   .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++
24. Materiel Dist Sys (MDS)          Logistics C     .   .   .   .   .   .   .   +++++++++++++++++++++++++++++++
11. Ash Cans                         Safety   C     .   .   .   .   .   .   .   .+++++++++++++++++++++++++++++++
17. Redistribute Excess Equip        Logistics C     .   .   .   .   .   .   .   .++++++++++++++++++++++++++++++
41. CAPOC                            CSD      C     .   .   .   .   .   .   .   .   ++++++++++++++++++++++++++++
42. Drug Distribution                Pharmacy C     .   .   .   .   .   .   .   .   .++++++++++++++++++++++++
43. Patient Appt System              CSD      C     .   .   .   .   .   .   .   .   .   +++++++++++++++++++++++++++++++++++++++
32. Fire/Safety Plan                 Safety   C     .   .   .   .   .   .   .   .   .   ++++++++++++++++++++++++++++++++++
44. Morgue Operations                Pathology C     .   .   .   .   .   .   .   .   .   ++++++++++++++++++++++++++++++++++
14. Shuttle Bus                      Logistics C     .   .   .   .   .   .   .   .   .   |========================================
35B. Furniture (Ship)                HPPO     C     .   .   .   .   .   .   .   .   .   |  ==================================
32. Policies/SOPs                    Admin Res C     .   .   .   .   .   .   .   .   .   |    ===============================
33. Dedication Ceremony              Admin Res C     .   .   .   .   .   .   .   .   .   |      ============================
38. Patient Rep/Info Desk            CSD      C     .   .   .   .   .   .   .   .   .   |        ========================
13. Parking                          Safety   C     .   .   .   .   .   .   .   .   .   |          =====================
27. Linen Distribution               Logistics C     .   .   .   .   .   .   .   .   .   |          =====================
39. Patient Info Booklet             NPO      C     .   .   .   .   .   .   .   .   .   |            ==================
34. Signage Placement                HPPO     C     .   .   .   .   .   .   .   .   .   |            ==================
01. Key Control                      POT&S    C     .   .   .   .   .   .   .   .   .   |              ================
40. Red Cross                        CSD      C     .   .   .   .   .   .   .   .   .   |              ================
Contract Completion Date
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n Plan

ACH33F

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Contract Growth Period              C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .   =============
04. Revise EPP           POT&S       C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .   =============
07. Equip/Systems Training POT&S     C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  .  ==========
25. Equip/Systems Test   Logistics   C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  . .==========
43. Pharmacy Stock       Pharmacy    C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  .  . ==========
31. Publicity Program    NPO         C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  .  .   ==
54. Patient Distress System DON      C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  .  .   ==
06. Move SQT Lab         POT&S       C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  .  .  .
16B. Equipment Turn In   Logistics   C    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  .  .  .
Beneficial Occupancy Date           pp    .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .
Retrofit/Transition Period          J     .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .
35?. Furniture (Delivery) HFPC            .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .
43B. Infectious Waste Equip. Prev Med C   .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .|  .  .  .  .  .  .  .  .  .
Hospital Move-In Date               C     .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .  .
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? Done                  === Task          - Slack time (==---- , or
C Critical              +++ Started task     Resource delay (---==)
R Resource conflict     M Milestone       > Conflict
p Partial dependency
Scale: Each character equals 1 week
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TIME LINE Gantt Chart Report

48. Transition Funding	51. Personnel Stabilizat ion	49.Space Alloc Old Hospital	50.Space Alloc New Hospital	47. Transition Staffing	28.Vending Machines	45. Specimen Collection Sta.	18. Placement New Equipment	19.LOG Cat C Equipment	21.Rep Control	33. Physical Security	39.Fire Safety Plan

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:5.      : :18.       : :19.LOG Cat: :01.Key    : :23.       : :09.Fire/  : :04.Revise : :06.Move  :
:pecimen : :Placement : :C         : :Control   : :Physical  : :Safety    : :EPF       : :SQT Lab  :
:ollection: :New      : :Equipment : :          : :Security  : :Plan      : :          : :.        :
:ta.     : :Equipment : :          : :          : :          : :          : :          : :         :
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10.Equip/ Systems Training	11.Ash Cans	12.Fire Extinguishers	14.Shuttle Bus	13.Parking	16A. Equipment Turn In	16B. Equipment Turn In	17.Redistribute Excess Equip	03.Special Equip Relocation	01.Administrative Shuttle	02.Maintenance Contract	07. Sys...

17.Redistr	20.Special	21.Adminis	22.Mainten	25.Equip/	24.	27.Linen D
ibute	Equip	trative	ance	Systems	Materiel	istributio
Excess	Relocation	Shuttle	Contract	Test	Dist Sys	n
Equip					(MDS)	

30.Patient Info Booklet	31. Publicity Program	32. Policies/ SOPs	33. Dedication Ceremony	34.Signage Placement	35A. Furniture (Buy)	35B. Furniture (Ship)	35C. Furniture (Delivery)	36.Artwork Oklahoma	37.Artwork Generic	38.Patient Rep/Info Desk	39.Patient Appt System

35. Furniture Ship	35C. Furniture (Delivery)	36.Artwork Oklahoma	37.Artwork Generic	38.Patient Rep/Info Desk	39.Patient Appt System	40.Red Cross	41.CAPOC

42.Drug Distribution	44.Morgue Operations	43. Pharmacy Stock	46A. Infectious Waste	46B. Infectious Waste Equip.	52. Bulletin Boards	56. Telephone System	55.3 A System	54.Patient Distress System	57. Portable System	51.Paper System	63.Pr.. pivot

	52.	56.	55.P A	54.Patient	57.	61.Paeper	64.Phst Re	53.	59.ADP
rus	Bulletin	Telephone	System	Distress	Facsimile	System	quirements.	Hospital	System
re	Boards	System		System	System			Music	
S									

60.Closed Circuit TV	Constructi on Period	Contract Completion Date	Contract Growth Period	Beneficial Occupancy Date	Retrofit Transition Period	Hospital Move-In Date

APPENDIX G

Filtered Macro Sub-Schedule for IMO

Schedule Name: Reynolds Army Comm. Hospital Phase I Transition Plan
Project Manager: CPT Ward/MAJ Forsythe 1-2915/3206//1-3522/5315
As of date: 21-Jul-88 7:58am   Schedule File: A:RACH1GRP

This is a selective report. All items shown
  * Are milestones, or
  * Uses resource IMO

	Who	Status	87 Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	88 Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	89 Jan	Feb	Mar
			1	1	1	1	3	1	1	2	1	4	1	1	1	2	1	1	1	1	3	1	1	3	1	1
57. Facsimile System	IMO	C	••
56. Telephone System	IMO	C						••
61. Beeper System	IMO	C						•••
59. ADP System	IMO	C										•••
21. Administrative Shuttle	IMO	C									•••
55. P A System	IMO											••
60. Closed Circuit TV	IMO	C									••••••••••••••••••••••••••••••••••••••
58. Hospital Music	IMO										•••••••••••••••••••••••••••••••••
Contract Completion Date																		3.						M	
Beneficial Occupancy Date		pp																3.							
Hospital Move-In Date		C																3.							

D Done   ___ Task   D Slack time (__DDD), or
C Critical   *** Started task   Resource delay (DDD__)
R Resource conflict   M Milestone   ) Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report

						88									89														
Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct
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Strip 1

Filtered Macro Sub-Schedule for Canella

This is a selective report. All items shown
  ‡ Are milestones, or
  ‡ Notes (2) contains "CANELLA", or
  ‡ Uses resource Logistics
(Additionally, some tasks were manually selected or excluded.)

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                                                87                              88                                              89
                                                Mar Apr May Jun  Jul Aug Sep  Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  Feb
                                   Who   Status 2   1   1   1    1   3   1    1   2   1   4   1   1    1   2   1   1   1    1   3   1   1   3    1

Construction Period                             C +++++++++++++++++++++++++-+++++++++++-+++++++++++++++++++++++++++-+++++++++-++++++++++++++++++-++++++++-+-++++.
28. Vending Machines               Logistics  C    .   .   .    .    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++-+-+++++
45. Specimen Collection Sta.       Pathology  C    .   .   .    .    ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++-+++-++-++++++++++
20. Special Equip Relocation       Logistics       .   .   .    .   .   .  +-++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++-++++
18. Placement New Equipment        Logistics  C    .   .   .    .   .   .   ++++++-++++++++++++++++++++++++++++++++++++++++++++++++++++++-++++++++-++++++++++
64. Post Requirements              DCA        C    .   .   .    .   .   .   +++++++++++++++++++++++++++++++++++++++++++++-++++++++-+++++++++-++++++++++-+++++++
19. LOG Cat C Equipment            Logistics  C    .   .   .    .   .   .   .  +++++++++++++++++++++++++++++++++++++-+++++++++++++++++++-+-++++++++++-+++++++
37. Artwork Generic                HPPO       C    .   .   .    .   .   .   .  . +++++++++++++++++++++++++++++++++++++-+++++++++++++++++++-++++++++++-+++++++
21. Administrative Shuttle         Logistics  C    .   .   .    .   .   .   .  .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++-++-+++++++-++++
22. Housekeeping Contract          Logistics       .   .   .    .   .   .   .  .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++-++-++++-++++++-++
46A. Infectious Waste              Prev Med         .   .   .    .   .   .   .  .  +++++++++++++++-+++++++++++++.   .    .   .   .    .   .   .   .    .   .
16A. Equipment Turn In             Logistics         .   .   .    .   .   .   .  .  +-+-+++++++++++++++++-++++++++-++++++++.   .    .   .   .   .    .   .
24. Materiel Dist Sys (MDS)        Logistics  C    .   .   .    .   .   .   .  .   ++++++-++++++++++++++++++++++++++++++-++++++.   .    .   .   .    .   .
11. Ash Cans                       Safety     C    .   .   .    .   .   .   .  .   .=============================================================
17. Redistribute Excess Equip      Logistics  C    .   .   .    .   .   .   .  .   .  ==========================================================
41. CAPOC                          CSD        C    .   .   .    .   .   .   .  .   .=============================================================
14. Shuttle Bus                    Logistics  C    .   .   .    .   .   .   .   .   .   .  ==================================================
35B. Furniture (Ship)              HPPO       C    .   .   .    .   .   .   .   .   .   .    .  ==========================================
27. Linen Distribution             Logistics  C    .   .   .    .   .   .   .   .   .   .    .   .   .  ==============================
34. Signage Placement              HPPO       C    .   .   .    .   .   .   .   .   .   .    .   .   .     ===================
23. Trash Removal                  Logistics  C    .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .  =====
Contract Complete                                  .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .    H
Contract Growth Time                          C    .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .    ===
25. Equip/Systems Test             Logistics  C    .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .
16B. Equipment Turn In             Logistics  C    .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .
35C. Furniture (Delivery)          HPPO       C    .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .
Beneficial Occupancy                          pp   .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .
Retrofit/Transition Phase                     pC   .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .
Hospital Move-In                              C    .   .   .    .   .   .   .   .   .   .    .   .   .     .   .   .   .    .   .   .   .
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D Done                 === Task          - Slack time (==----), or
C Critical             +++ Started task    Resource delay (----==)
R Resource conflict    M Milestone       ) Conflict
p Partial dependency
Scale: Each character equals 1 week
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TIME LINE Gantt Chart Report

Plan

CH1GRP

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Micro Sub-Schedules for Logistics

Schedule Name: Turn-In of Excess Equipment and Furniture
Project Manager: CPT Mark Silkwood
As of date: 29-Mar-88 2:03pm   Schedule File: C:\TLDATA\LOG16

MTTs 16, 17, 18, 19 are under this project manager.

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                                   87        88                                                     89
                                   Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug
                          Who   Status 1  2  1  4  1  1    1  2  1  :  1   1  3  :  1  3    1  :    3  1  :    :  :

Construction Period                      ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++-+.  .   .   .   .   .  .
Identify excess equipment  Soper          .   .  ++++++++++++++++++++++++++++ .   .   .   .   .   .   .   .   .   .   .   .   .  .
Develop TI plan for non-med xs DOL        .   .   .   .   .   .  |.   .   .  .:==========  .   .   .   .   .   M  .   .   .   .  .
Contract Complete           C             .   .   .   .   .   .  |.   .   .   .   .   .   .   .   .   M  .   .   .   .   .
Contract Growth Time                      .   .   .   .   .   .  |.   .   .   .   .   .   .   .   .   ==================  .   .
Beneficial Occupancy Date   C             .   .   .   .   .   .  |.   .   .   .   .   .   .   .   .   .   .   .   M
Retrofit / Transition Phase               .   .   .   .   .   .  |.   .   .   .   .   .   .   .   .   .   .   .   .   =============
TI excess medical equipment  Med Maint    .   .   .   .   .   .  |.   .   .   .   .   .   .   .   .   .   .   .   .   ===========
TI excess non-medical equip  DOL          .   .   .   .   .   .  |.   .   .   .   .   .   .   .   .   .   .   .   .   =============
Hospital Move-In            C             .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .
```

```
D Done              === Task        - Slack time (==---- , or
C Critical          +++ Started task   Resource delay (---==)
R Resource conflict  M Milestone    : Conflict
p Partial dependency
Scale: Each character equals 1 week
```

TIME LINE Gantt Chart Report

```
                                            89                                    90
Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
 1   1    1   2   1   1   1    1   3   1   1   3    1  1    3   1   1    3   1   1   2    1   1   2   1   1   2   1

..+++++++++++++++++++++++++++++++++++++++++++++.   .      .        .     .      .      .      .     .     .     .
..+++++++++++++++++++++++++     .    .    .    .    .      .        .     .      .      .      .     .     .     .
 .   .     .   .   .  .:==========   .   .    .    .      .        .     .      .      .      .     .     .     .
 .   .     .   .   .   .   .   .   .   .   .   .    M  .   .   .    .     .      .      .      .     .     .     .
 .   .     .   .   .   .   .   .   .   .   .   .    .   :================    .     .      .      .     .     .     .
 .   .     .   .   .   .   .   .   .   .   .   .    .   .   .   M   .    .     .      .      .      .     .     .     .
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 .   .     .   .   .   .   .   .   .   .   .   .    .   .   .   :===============   .      .      .     .     .     .
 .   .     .   .   .   .   .   .   .   .   .   .    .   .   .   :===============   .      .      .     .     .     .
 .   .     .   .   .   .   .   .   .   .   .   .    .   .   .   .    .    M     .      .      .     .     .     .
```

Strip 1

Schedule Name: Redistribution of Excess Equipment
Project Manager: CPT Mark Silkwood
As of date: 29-Mar-88 2:49pm   Schedule File: C:\TLDATA\LOG17

MTTs 16, 17, 18, 19 are under this project manager.


```
                                      87        88                                                        89
                                      Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep
                             Who   Status 1  2  1  4  1  1    1  2  1  1  1    1  3  1  1  3    1  1    3  1  1    2  1  1

Construction Period                       +++++++++++++++-+++++++++-+++++++++++-++++++++++++++++++++++++++++++-.  .   .   .   .    .   .   .
Find storage space for excess Soper        .  .  .  .  .  .  |==========   .   .    .   .   .   .   .    .   .    .   .   .    .   .   .
Develop tentative excess list  Soper        .  .  .  .  .  .  |.  .   ===============   .    .   .   .   .   .    .   .    .   .   .    .   .   .
Items for non-moving sections  Soper        .  .  .  .  .  .  |.  .  .   .   .   ==============   .   .    .   .    .   .   .    .   .   .
Process equipment transfers    Soper        .  .  .  .  .  .  |.  .  .  .  .   .   .   ==============    .   .    .   .   .    .   .   .
Contract Complete                   C       .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    M  .    .   .   .    .   .   .
Contract Growth Time                        .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    ==================   .   .   .
Update excess list             Soper        .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    .  ==============    .   .   .
Beneficial Occupancy Date           C       .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    .   .    .   .   M    .   .   .
Dist excess equipment list     PA?          .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    .   .    .   .   .    =====.  .   .
Retrofit / Transition Phase                 .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    .   .    .   .   .    ==============
Process lateral transfers      Soper        .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    .   .    .   .   .    .   ==========
Hospital Move-In                    C       .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    .   .    .   .   .    .   .   M
Report excess equipment        Soper  C     .  .  .  .  .  .  |.  .  .  .  .   .   .   .   .    .   .    .   .   .    .   .   ====
```

D Done   === Task   - Slack time ------:, or
C Critical   +++ Started task   Resource delay ----::
R Resource conflict   M Milestone   : Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report

```
                                        89                              90
n Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
  1   1    1   2   1   1   1    1   3   1   1   3    1   1    3   1   1    3   1   1   2    1   1   2   1   1   2   1

--+++++++++++++++++++++++++++++++++++++++++++++++++++.  .   .   .   .   .   .   .   .   .   .   .   .   .
  .   . |=========   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .
  .   . |.   . ===============   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   . ==============   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   . =============   .   .   .   .   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   M   .   .   .   .   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   . =================   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   . ===============   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   .   .   M   .   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   .   . =====.   .   .   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   .   . ===============   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   .   .   . =========   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   .   .   .   .   M   .   .   .   .   .   .   .   .
  .   . |.   .   .   .   .   .   .   .   .   .   .   .   . ==========   .   .   .   .   .   .   .
```

```
--- , or
---==)
```

Strip :

Schedule Name: Placement/Accounting for New Equipment
Project Manager: CPT Mark Silkwood
As of date: 30-Mar-88 10:37am   Schedule File: C:\TLDATA\LOG18

MTTs 16, 17, 18, 19 are under this project manager.

```
                                              87        88                                                        89
                                              Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Au
                              Who    Status 1  2   1   4   1   1    1   2   1   1   1    1   3   1   1   1    1  1       1   1   1    1   1

Construction Period                         ++++++++-++++-+--++++++++++++-+++++++--+-++++--+++++-+++++++++++++-.  .    .   .   .    .   .
Review equipment listings     Med Maint  D  =====  .   .   .   .   |.   .   .   .   .   .    .   .   .   .   .    .  .    .   .   .    .   .
Inspect equipment             Med Maint     +--++++++--+++++-++++++-+++++++++-+++++++++------+-++++++++++++++++--+  .    .   .   .    .   .
ID items to go to new facility Super        .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   ==========  .    .   .   .    .   .
Contract Complete                        C  .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   . M  .    .   .   .    .   .
ID additional utility req.    Med Maint     .   .   .   .   .   -.  |.   .   .   .   .    .   .   .   .   ====  .    .   .   .    .   .
Contract Growth Time                        .   .   .   .   .   |.   .   .   .   .   .    .   .   .   . ==================  .   .    .   .
Moving req to Post Trans. Br. Silkwood      .   .   .   .   .   |.   .   .   .   .   .    .   .   .   . =======  .   .    .   .
Enter new & stored equip in PB Super        .   .   .   .   .   .   .   .   .   .   .    .   .   .   . .   .  =========
Beneficial Occupancy Date                C  .   .   .   .   .   |.   .   .   .   .   .    .   .   .   . .   v  .   .
Retrofit / Transition Phase                 .   .   .   .   .   |.   .   .   .   .   .    .   .   .   . =========
Tag equipment to be moved     Super         .   .   .   .   .   |.   .   .   .   .   .    .   .   .   . .   .  ======
Hospital Move-In                         .  .   .   .   .   .   |.   .   .   .   .   .    .   .   .   .    .  .    .
```

```
D Done                    === Task         - Slack time (==---), or
C Critical                +++ Started task   Resource delay  ---==
R Resource conflict       M Milestone      > Conflict
p Partial dependency
Scale: Each character equals 1 week
```

TIME LINE Gantt Chart Report

```
                              89                                              90
May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
 2   1   1   1    1   3   1   1   3    1   1    3   1   1    3   1   1   2    1   1   2   1   1   2   1

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  .   .   .    .   .   .   .   .  =========    .    .    .    .    .    .    .    .    .    .    .    .
  .   .   .    .   .   .   .   . M   .    .    .    .    .    .    .    .    .    .    .    .    .    .
  .   .   .    .   .   .   .   . ====    .    .    .    .    .    .    .    .    .    .    .    .    .
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  .   .   .    .   .   .   .   .   .    .   . ===============    .    .    .    .    .    .    .    .    .
  .   .   .    .   .   .   .   .   .    .   . M    .    .    .    .    .    .    .    .    .    .    .    .
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  .   .   .    .   .   .   .   .   .    .   .    . =========    .    .    .    .    .    .    .    .    .
  .   .   .    .   .   .   .   .   .    .   .    .    .   . M    .    .    .    .    .    .    .    .    .
```

Strip 1

Schedule Name: LOG CAT C Equipment Acquisition
Project Manager: CPT Mark Silkwood
As of date: 30-Mar-88 11:13am   Schedule File: C:\TLDATA\LOG19

MTTs 16, 17, 18, 19 are under this project manager.

```
                                    87        88                                                        89
                                    Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug S
                            Who   Status 1  2  1  4  1  1   1  2  1  1  1   1  3  1  1  3   1  1   3  1  1    3  1  S

Construction Period                      ++++++++++++++++++++++++++++++++-+++++++++++-+++++++++++-+++++++++++++.  .    .   .   .    .  .
Equipment needs established.  Silkwood  D    .   .   .   M   .  I.  .   .   .   .   .    .  .   .   .   .    .  .    .   .   .    .  .
Prepare MPRs                  MEDCASE         .   .   .   ++++++++++.   .   .   .   .   .    .  .   .   .   .    .  .    .   .   .    .  .
Obtain approvals on 5028Rs    MEDCASE         .   .   .   .   . ===========================   .   .   .    .  .    .   .   .    .  .
Prepare purchase requests     MEDCASE         .   .   .   .   . I.  .   .   .   .   .   .   ==========   .   .    .  .    .   .   .    .  .
Contracting                   DOC             .   .   .   .   . I.  .   .   .   .   .   .    .   .  ==================   .   .    .  .
Contract Complete                      C     .   .   .   .   . I.  .   .   .   .   .   .    .   .   .   .   M    .  .    .   .   .    .  .
Contract Growth Time                         .   .   .   .   . .   .   .   .   .   .   .    .   .   .   .   ==================   .    .  .
Delivery                      Silkwood C     .   .   .   .   . .   .   .   .   .   .   .    .   .   .   .   .    .  . ======================
Beneficial Occupancy Date              C     .   .   .   .   . I.  .   .   .   .   .   .    .   .   .   .   .    .  .   V    .    .  .
Retrofit / Transition Phase                  .   .   .   .   . .   .   .   .   .   .   .    .   .   .   .   .    .  .    . ==================
Hospital Move-In                             .   .   .   .   . .   .   .   .   .   .   .    .   .   .   .   .    .  .    .   .    .  V
```

D Done   === Task   - Slack time '==---', or
C Critical   ++- Started task   Resource delay (----=)
R Resource conflict   M Milestone   \ Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report

```
                                        89                                          90
Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
  1      1   2   1   1   1    1   3   1   1   3    1  1    3   1   1    3   1   1   2    1   1   2   1   1   2   1

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M    .   !.   .    .    .    .    .    .    .    .   .     .    .     .    .   .   .     .   .   .   .   .   .   .
+++++++++.    .    .    .    .    .    .    .    .   .     .    .     .    .   .   .     .   .   .   .   .   .   .
  .   .   '=========================.    .    .    .   .     .    .     .    .   .   .     .   .   .   .   .   .   .
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  .   .   !    .    .    .    .    .    ===================.    .   .     .    .     .    .   .   .     .   .   .   .   .   .   .
  .   .   !    .    .    .    .    .    .    .    M .   .     .    .     .    .   .   .     .   .   .   .   .   .   .
  .   .   !    .    .    .    .    .    .    .    ==================.   .     .    .     .    .   .   .     .   .   .   .   .   .   .
  .   .   !    .    .    .    .    .    .    .    .   ==================.     .    .     .    .   .   .     .   .   .   .   .   .   .
  .   .   !.   .    .    .    .    .    .    .    .   .     .    M  .     .    .   .   .     .   .   .   .   .   .   .
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  .   .   !.   .    .    .    .    .    .    .    .   .     .    .     .    .   M .     .   .   .   .   .   .   .
```

- , or
----==!

                                                                            Strip 1

Schedule Name: Expansion of Post Shuttle Bus
Project Manager: Leon Webb
As of date: 30-Mar-88 12:50pm   Schedule File: C:\TLDATA\LOG14

MTTs 14, 20, 21, 22, 23, 25, 27, 28 are under this project manager.

```
                                    87        88                                                              89
                                    Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep
                         Who  Status 1   2   1   4   1   1    1   2   1   1   1    1   3   1   1   3    1   1    3   1   1    3   1   1

Construction Period                 +++++++++++-++++++++++++++++++++++++++++++++++++++++++++++++++++.   .    .    .    .   .   .   .
Find out current route/hours  Leon      .   .   .   .   .   !.  .   .   .   .   ===================   .   .    .    .    .   .   .   .
Identify stops at new hospital Leon     .   .   .   .   .   !.  .   .   .   .   .   .   .   ================  .   .    .    .   .   .   .
Contract Complete          C            .   .   .   .   .   !.  .   .   .   .   .   .   .   .   M   .    .   .    .    .   .   .   .
Contract Growth Time                    .   .   .   .   .   !.  .   .   .   .   .   .   .   ===================  .    .   .   .   .
Work with DOL to add new stops IMO      .   .   .   .   .   !.  .   .   .   .   .   .   .   .   .   .    ===============   .   .   .
Beneficial Occupancy Date     C         .   .   .   .   .   !.  .   .   .   .   .   .   .   .   .   .    .   .    .   M    .   .   .
Retrofit / Transition Phase             .   .   .   .   .   !.  .   .   .   .   .   .   .   .   .   .    .   .    .   ===============
Publicity for new bus stops   PAO  C     .   .   .   .   .   !.  .   .   .   .   .   .   .   .   .   .    .   .    .   .    ==========
Hospital Move-In              C     .   .   .   .   .   !.  .   .   .   .   .   .   .   .   .   .    .   .    .   .    .   .   M
```

```
D Done                  === Task        - Slack time (==---), or
C Critical              +++ Started task   Resource delay (----==)
R Resource conflict     M Milestone     > Conflict
p Partial dependency
Scale: Each character equals 1 week
```

TIME LINE Gantt Chart Report

```
                          89                                    90
r  Apr May Jun Jul Aug Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
   1   2   1   1   1   1   3   1   1   3    1  1    3   1   1    3   1   1   2    1   1   2   1   1   2   1

 ·+++++++++++++++++++++++++++++++++++++++++·  .    ·   ·   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
   :    ·   ·   ·   ·   ================    .   .    ·   ·   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
   :.   ·   ·   ·   ·   ·   ·   ·   ·   ===============   ·   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
 !  :.  ·   ·   ·   ·   ·   ·   ·   ·   ·   M   .   ·   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
 |  ·   ·   ·   ·   ·   ·   ·   ·   ·   ·    ·   =================   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
 |  ·   ·   ·   ·   ·   ·   ·   ·   ·   ·    ·   ·    ===============   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
 :  :.  ·   ·   ·   ·   ·   ·   ·   ·   ·    ·   ·    ·   ·   M    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
 :  :.  ·   ·   ·   ·   ·   ·   ·   ·   ·    ·   ·    ·   ·   ·    ==============   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
    ·   ·   ·   ·   ·   ·   ·   ·   ·   ·    ·   ·    ·   ·   ·    =========   ·    ·   ·   ·   ·    ·   ·   ·   ·   ·   ·   ·
    ·   ·   ·   ·   ·   ·   ·   ·   ·   ·    ·   ·    ·   ·   ·    ·   ·   M    ·   ·   ·   ·    ·   ·   ·   ·   ·
```

Strip 1

Schedule Name: Special Equipment Relocation
Project Manager: Leon Webb
As of date: 30-Mar-88 1:47pm   Schedule File: C:\TLDATA\LOG20

MTTs 14, 20, 21, 22, 23, 25, 27, 28 are under this project manager.

```
                                 87          88                                              89
                                 Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct
                          Who    Status 1  2  1  4  1  1   1  2  1  1  1   1  3  1  1  3  1 1   3  1   :   :  :  :  :

Construction Period              +++++++++++++++++++++++++++++++++++-+++++++--+++++++++++++++++++-++++. .    .    .    .    .    .    .
Identify special equipment  Leon  D =======  .    .    .    .   |.   .    .    .    .    .    .    .    .    .    .    .    .    .    .
Do room-by-room equipment list Leon  D ===============  .    .  |.   .    .    .    .    .    .    .    .    .    .    .    .    .    .
Develop proposals for movement Leon  C    .    .    .    .    . |.   .    .    .    .    .    .    .  =================== .    .    .
Contract Complete                C    .    .    .    .    .    .|.   .    .    .    .    .    .    .    M  .    .    .    .    .    .
Contract Growth Time                  .    .    .    .    .    .  .   .    .    .    .    .    .    .  =================== .    .    .
Beneficial Occupancy Date        C    .    .    .    .    .    .|.   .    .    .    .    .    .    .    .    .    .    :  .    .    .
Retrofit / Transition Phase           .    .    .    .    .    .|.   .    .    .    .    .    .    .    .    .    .  =============== .
Hospital Move-In                 C    .    .    .    .    .    .|.   .    .    .    .    .    .    .    .    .    .    .    .    V
```

```
f Done              === Task        - Slack time (=----), or
C Critical          +++ Started task  Resource delay (----=)
R Resource conflict   M Milestone    > Conflict
p Partial dependency
Scale: Each character equals 1 week
```

TIME LINE Gantt Chart Report

```
                                          89                                        90
Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
 1   2   1   1   1    1   3   1   1   3    1  1    3  .1   1    3   1   1   2    1   1   2   1   1   2   1

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                                                                                    Strip 1

Schedule Name: Equipment/Systems Testing
Project Manager: Leon Webb
As of date: 30-Mar-88 3:16pm   Schedule File: C:\TLDATA\LOG25

MTTs 14, 20, 21, 22, 23, 25, 27, 28 are under this project manager.

```
                                      87        88                                                    89
                                      Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug
                              Who  Status 1   2   1   4   1   1    1   2   1   1   1    1   3   :   :   3    1  1    3   1   :    :   :

Construction Period                        +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++.   .       .   .    .   .
Locate alarm systems      Med Maint        .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .  =====.      .   .    .   .
Contract Complete                     C    .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .   M  .      .   .    .   .
Adapters for outlets needed CSD            .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .  ====   .   .    .   .
Hazard signs & safety reqmnts Safety       .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .  ====   .   .    .   .
Contract Growth Time                       .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .  ==================   .
Maint and Operator Training Med Maint      .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .   .  ==============   .
Beneficial Occupancy Date             C    .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .   .   .    .   v    .
Retrofit / Transition Phase                .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .   .   .    .   .    ==============
Testing new equipment/systems Med Maint C  .   .   .   .   .   .  !.   .   .   .   .   .   .   .   .   .   .   .    .   .    ==============
Hospital Move-In                      C    .   .   .   .   .   .  .   .   .   .   .   .   .   .   .   .   .   .    .   .    .   .
```

D Done   === Task   - Slack time (==---), or
C Critical   +++ Started task   Resource delay (----==)
R Resource conflict   M Milestone   ) Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report

```
                              89                              90
:n Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
  1   1    1   3   1   1   3    1   1    3   1   1    3   1   1   2    1   1   2   1   1   2   1

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```

Strip :

Schedule Name: Linen Distribution
Project Manager: Leon Webb
As of date: 30-Mar-88 3:31pm   Schedule File: C:\TLDATA\LOG27

MTTs 14, 20, 21, 22, 23, 25, 27, 28 are under this project manager.

```
                                            87      88                                                    89
                                            Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep
                              Who   Status   1   2   1   4   1   1    1   2   1   1   :    1   3   1   1   3    1  1    3   1   1    2   1   :

Construction Period                          +++++++++++++++-++++++++-+++++++++++-+++++++++++++++++++++-+++++++++.   .    .   .   .    .   .   .
Additional linen for Phase I  Leon           .   .   .   .   .   . |. .   .   .   .   .   . =====   .   .    .  .    .   .   .    .   .   .
Determine space new facility  Leon           .   .   .   .   .   . |. .   .   .   .   .   . ==========   .    .  .    .   .   .    .   .   .
Determine personnel requiremnt Leon          .   .   .   .   .   . |. .   .   .   .   .   .   .   . =====.    .  .    .   .   .    .   .   .
Schedule X for extra staffing Leon           .   .   .   .   .   . |. .   .   .   .   .   .   .   . =====.    .  .    .   .   .    .   .   .
Contract Complete              C             .   .   .   .   .   . |. .   .   .   .   .   .   .   .   .    M  .    .   .   .    .   .   .
Contract Growth Time                         .   .   .   .   .   . |. .   .   .   .   .   .   .   .   .    ================   .   .   .   .
Submit staffing requirements  Leon           .   .   .   .   .   . |. .   .   .   .   .   .   .   .   .    ================   .   .   .   .
Beneficial Occupancy Date      C             .   .   .   .   .   . |. .   .   .   .   .   .   .   .   .    .  .    V   .   .    .   .   .
Hire and Train new personnel  Leon           .   .   .   .   .   . |. .   .   .   .   .   .   .   .   .    .  .    .   .   .    ================
Retrofit / Transition Phase                  .   .   .   .   .   . |. .   .   .   .   .   .   .   .   .    .  .    .   .   .    ================
Hospital Move-In               C             .   .   .   .   .   . |. .   .   .   .   .   .   .   .   .    .  .    .   .   .    .   .   V
```

D Done   === Task   - Slack time (==----), or
C Critical   +++ Started task   Resource delay (---==)
R Resource conflict   M Milestone   Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report

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                                          89                                        90
'eb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
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```

Strip 1

Schedule Name: Vending Machines
Project Manager: Leon Webb
As of date: 30-Mar-88 3:47pm   Schedule File: C:\TLDATA\LOG28

MTTs 14, 20, 21, 22, 23, 25, 27, 28 are under this project manager.

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                                    87        88                                                      89
                                    Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep
                        Who  Status 1   2   1   4   1   1    1   2   1   1   1     1   3   1   1   3    1   :   3   1   :    3   :   :   2

Construction Period                   +++++++++++++++++++++++++++++++++++++++++++-+++++++++++++++-++++. .       .   .   .   .   .   .
Vending machine utility needs Leon      .   .   .  +++++++++++++++  .   .   .   .  .   .   .   .   .    .   .   .   .   .   .   .   .   .
Submit Transition Budget      Leon      .   .   .   .   . !:::::::::::::::  .   .  .   .   .   .   .    .   .   .   .   .   .   .   .   .
Determine facility changes    Leon      .   .   .   .   . !:   :::::::::  .   .   .  .   .   .   .   .  .   .   .   .   .   .   .   .   .
Initiate ECP for changes      Leon      .   .   .   .   . !:   .   :::::  .   .   .  .   .   .   .   .  .   .   .   .   .   .   .   .   .
Contract Complete                C      .   .   .   .   . !:   .   .   .   .   .   .  .   .   .   .   . M .   .   .   .   .   .   .   .
Contract Growth Time                    .   .   .   .   . !:   .   .   .   .   .   .  .   .   .   .   . :::::::::::::::::  .   .   .   .
Beneficial Occupancy Date        C      .   .   .   .   . !:   .   .   .   .   .   .  .   .   .   .    .   .   .   .   M   .   .   .   .
Retrofit / Transition Phase             .   .   .   .   . !:   .   .   .   .   .   .  .   .   .   .    .   .   .   .   :::::::::::::::  .
Modifications in retrofit time Leon     .   .   .   .   . !:   .   .   .   .   .   .  .   .   .   .    .   .   .   .   :::::::::::::::  .
Hospital Move-In                        .   .   .   .   . !:   .   .   .   .   .   .  .   .   .   .    .   .   .   .   .   .   .   .   M
Area turned over to AFEES        C      .   .   .   .   . !:   .   .   .   .   .   .  .   .   .   .    .   .   .   .   .   .   .   .   M
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D Done               ::: Task        - Slack time (::---|, or
C Critical           +++ Started task   Resource delay (---::)
E Resource conflict  M Milestone      ' Conflict
p Partial dependency
Scale: Each character equals 1 week
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TIME LINE Gantt Chart Report

manager.

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8                                    89                                    90
an Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Ncv Dec Jan Feb Mar Apr May
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                                                                                              Strip 1
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Schedule Name: Materiel Distribution System
Project Manager: Ron Burton
As of date: 30-Mar-88 4:21pm   Schedule File: C:\TLDATA\LOG24

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                                       87          88                                                         89
                                       Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep
                            Who   Status 1   2   1   4   1   1    1   2   1   :   1    1   3   1   1   3    :  1    3   1   :    :   1   :   :

Construction Period                     ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++-++.  .    .    .    .   .    .   .   .
Develop Schedule X for MDS  Burton       .   .   .   .  +++++++++++++++  .   .   .    .   .   .   .   .    .   .   .    .   .   .    .   .
Validate auth to staff MDS  Burton       .   .   .   .   .   :.  =============================  .   .    .   .   .    .   .   .    .   .
Obtain warehouse facilities Burton       .   .   .   .   .   :.  ================================================= .   .    .   .
Develop job descriptions    Burton       .   .   .   .   .  |.   .   .   .   .   .    .   .  =====  .   .    .   .   .    .   .
Submit recruitment actions  Burton   C   .   .   .   .   .  |.   .   .   .   .   .    .   . ========================  .   .    .   .
Procure additional carts    Silkwood     .   .   .   .   .  |.   .   .   .   .   .    .   . ==================  .   .    .   .
Contract Complete                    C   .   .   .   .   .  |.   .   .   .   .   .    .   .   .   M  .    .   .   .    .   .
Contract Growth Time                     .   .   .   .   .  |.   .   .   .   .   .    .   .   .  =================   .   .    .   .
Place all clinics on MDS    Burton       .   .   .   .   .  |.   .   .   .   .   .    .   .   .   .    .  ==================  .
Train new MDS staff         Burton       .   .   .   .   .  |.   .   .   .   .   .    .   .   .   .    .  =====   .   .    .   .
Beneficial Occupancy Date            C   .   .   .   .   .  |.   .   .   .   .   .    .   .   .   .    .   .   √    .   .    .   .
Retrofit / Transition Phase              .   .   .   .   .  |.   .   .   .   .   .    .   .   .   .    .   .  ===============
Move MDS to new facility             C   .   .   .   .   .  |.   .   .   .   .   .    .   .   .   .    .   .   .    .   .   .   u
Hospital Move-In                     :   .   .   .   .   .  |.   .   .   .   .   .    .   .   .   .    .   .   .    .   .   .   v
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D Done              === Task         - Slack time (==---), or
C Critical          +++ Started task   Resource delay (---==)
R Resource conflict   M Milestone    > Conflict
p Partial dependency
Scale: Each character equals 1 week
```

TIME LINE Gantt Chart Report

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                                        89                              90
lar Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
 1   2   1   1   1    1   3   1   1   3    1  1    3   1   1    3   1   1   2    1   1   2   1   1   2   1

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```

Strip 1

"Combined" Micro Sub-Schedules for Logistics

Schedule Name: Property Management Branch Combined MTTs
Project Manager: CPT Mark Silkwood
As of date: 30-Mar-88 11:22am   Schedule File: C:\TLDATA\PROPMGT

This schedule combines MTTs 16, 17, 18, and 19.

```
                                              87        88                                              83
                                              Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep
                                Who    Status  1   2   1   4   1   1    1   2   1   1   1    1   3   1   1   3    1  1    3   1   1    3
Construction Period                            +++++++-+++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++.  .      .       .    .   .
Review equipment listings       Med Maint  D  =====   .   .   .   .    |.  .   .   .   .    .   .   .   .   .    .      .   .   .    .    .   .
Inspect equipment               Med Maint     +++++++-++++++++++;+++++++++++++++++++++++++++++++++++++++-++++++-++++++-+  .       .    .   .
Identify excess equipment       Soper          .   .  +++-++++++++++++++++++++++  .   .    .   .   .   .   .    .      .   .   .    .    .   .
Equipment needs established.     Silkwood  D   .   .   .   M   .   |.   .   .   .   .   .    .   .   .   .   .    .      .   .   .    .    .   .
Prepare MPRs                     MEDCASE       .   .   .  +++++++++.   .   .   .   .   .    .   .   .   .   .    .      .   .   .    .    .   .
Find storage space for excess    Soper         .   .   .   .   .   |==========   .   .    .   .   .   .   .    .      .   .   .    .    .   .
Obtain approvals on 5028Es       MEDCASE       .   .   .   .   .   |=============================   .   .    .      .   .   .    .    .   .
Develop tentative excess list    Soper         .   .   .   .   .   |.  .  ===============   .    .   .   .   .    .      .   .   .    .    .   .
Develop TI plan for non-med xs   DOL           .   .   .   .   .   .   .  .===========   .    .   .   .   .    .      .   .   .    .    .   .
Items for non-moving sections    Soper         .   .   .   .   .   |.  .   .   .   ===============   .   .    .      .   .   .    .    .   .
Prepare purchase requests        MEDCASE       .   .   .   .   .   .   .   .   .   .  ==========   .   .    .      .   .   .    .    .   .
Process equipment transfers      Soper         .   .   .   .   .   .   .   .   .   .   .    .  ==============   .    .      .   .   .    .    .   .
Contracting                      DOC           .   .   .   .   .   .   .   .   .   .   .    .  ==================   .    .      .   .   .    .    .   .
If items to go to new facility   Soper         .   .   .   .   .   .   .   .   .   .   .    .  =========   .   .    .      .   .   .    .    .   .
Contract Complete                          T   .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   M  .      .   .   .    .    .   .
If additional utility req.       Med Maint     .   .   .   .   .   .   .   .   .   .   .    .   .   .   .  ====   .    .      .   .   .    .    .   .
Contract Growth Time                           .   .   .   .   .   .   .   .   .   .   .    .   .   .   .  ==================   .      .   .   .    .    .   .
Moving req to Post Trans. Br.    Silkwood      .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .  ======   .    .   .   .    .    .   .
Update excess list               Soper         .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .  ===============   .   .   .    .    .   .
Delivery                         Silkwood      .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      ============================
Dist excess equipment list       PAO           .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      .   .  =====:.  .    .   .
Enter new & stored equip in PB   Soper         .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      .   .  ==============   .    .   .
Beneficial Occupancy Date                  T   .   .   .   .   .   |.  .   .   .   .   .    .   .   .   .   .    .      .   .   v    .    .   .
Retrofit / Transition Phase                    .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      .   .   ================
TI excess medical equipment      Med Maint     .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      .   .   ==============
TI excess non-medical equip      DOL           .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      .   .   ==============
Tag equipment to be moved        Soper         .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      .   .   =========
Process lateral transfers        Soper         .   .   .   .   .   .   .   .   .   .   .    .   .   .   .   .    .      .   .   =========  .
Hospital Move-In                           C   .   .   .   .   .   |.  .   .   .   .   .    .   .   .   .   .    .      .   .   .    .      -
Report excess equipment          Soper     C   .   .   .   .   .   |.  .   .   .   .   .    .   .   .   .   .    .      .   .   .    .    .   ========= :
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D Done              ::: Task           - Slack time (==---), or
C Critical          +++ Started task     Resource delay (---==)
R Resource conflict  M Milestone       > Conflict
p Partial dependency
Scale: Each character equals 1 week
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TIME LINE Gantt Chart Report

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                        89                              90
Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
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Strip 1

Schedule Name: Service Branch Combined MTTs
Project Manager: Leon Webb
As of date: 5-Apr-88 10:42am   Schedule File: C:\TLDATA\SVCBR

Combines MTTs 14, 20, 25, 27, 28.
MTT 22 (Maintenance Contract) not included here.

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                                      87        88                                                         89
                                      Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun Jul Aug
                              Who   Status 1   2   1   4   1   1   1   2   1   1   1   1   3   1   1   1   1   1   2

Construction Period                        ++++++++++-+++++++++-++++++++-+++++++++-++++++++++++-+++++++++-++++++++++.
Identify special equipment    Leon    D  =======  .   .   .   .   :   .   .   .   .   .   .   .   .   .   .   .   .
Do room-by-room equipment list Leon   D  ===============  .   .   :   .   .   .   .   .   .   .   .   .   .   .   .
Vending machine utility needs Leon          .   .   .   ++++++++++++++-+   .   .   .   .   .   .   .   .   .   .
Submit Transition Budget      Leon          .   .   .   .   ++++++++++++-  .   .   .   .   .   .   .   .   .   .
Determine facility changes    Leon          .   .   .   .   .   ==========  .   .   .   .   .   .   .   .   .   .
Initiate ECP for changes      Leon          .   .   .   .   .   .   .   ======   .   .   .   .   .   .   .   .
Find out current route/hours  Leon          .   .   .   .   .   .   .   .   ==================   .   .   .   .   .
Additional linen for Phase I  Leon          .   .   .   .   :   .   .   .   .   =====   .   .   .   .   .
Determine space new facility  Leon          .   .   .   .   .   .   .   .   .   ==========   .   .   .   .
Locate alarm systems          Med Maint     .   .   .   .   .   .   .   .   .   .   =====.   .   .   .
Determine personnel requirement Leon        .   .   .   .   .   .   .   .   .   .   =====.   .   .   .
Schedule X for extra staffing Leon          .   .   .   .   :   .   .   .   .   .   =====.   .   .   .
Identify stops at new hospital Leon         .   .   .   .   .   .   .   .   .   .   ==============   .
Develop proposals for movement Leon    C    .   .   .   .   .   .   .   .   .   .   .   ==================
Contract Complete                      C    .   .   .   .   .   .   .   .   .   .   .   .   M   .   .
Adapters for outlets needed   CSD           .   .   .   .   .   .   .   .   .   .   .   .   ====
Hazard signs & safety reqmts  Safety        .   .   .   .   .   .   .   .   .   .   .   .   ====   .
Contract Growth Time                        .   .   .   .   .   .   .   .   .   .   .   ================
Submit staffing requirements  Leon          .   .   .   .   .   .   .   .   .   .   .   ================
Maint and Operator Training   Med Maint     .   .   .   .   .   .   .   .   .   .   .   .   ==============
Work with DOL to add new stops IMO          .   .   .   .   .   .   .   .   .   .   .   .   ================
Hire and Train new personnel  Leon          .   .   .   .   .   .   .   .   .   .   .   .   .   ========
Beneficial Occupancy Date                   .   .   .   .   .   .   .   .   .   .   .   .   .
Retrofit / Transition Phase                 .   .   .   .   .   .   .   .   .   .   .   .   .   ==========
Modifications in retrofit time Leon         .   .   .   .   .   .   .   .   .   .   .   .   .   ==========
Testing new equipment/systems Med Maint C   .   .   .   .   .   .   .   .   .   .   .   .   .   ==============
Publicity for new bus stops   PAO     C     .   .   .   .   :   .   .   .   .   .   .   .   .   ==========
Hospital Move-In                            .   .   .   .   .   .   .   .   .   .   .   .   .
Area turned over to AFEES             C     .   .   .   .   .   .   .   .   .   .   .   .   .
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D Done   === Task   - Slack time (==----), or
C Critical   +++ Started task   Resource delay (----==)
R Resource conflict   M Milestone   > Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report

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                        89                                    90
Jun Jul Aug Sep Oct Nov Dec Jan FebMar Apr May Jun  Jul Aug Sep Oct  Nov Dec Jan Feb Mar Apr May
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APPENDIX K

Time Line^R Status Report

Tasks scheduled for this week:

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Construction Period              Continues                         CRITICAL
57. Facsimile System             Continues                         CRITICAL
48. Transition Funding           Continues
51. Personnel Stabilization      Continues
52. Bulletin Boards              Continues                         <= 20% slack
28. Vending Machines             Continues                         CRITICAL
45. Specimen Collection Sta.     Continues                         CRITICAL
56. Telephone System             Continues                         CRITICAL
61. Beeper System                Continues                         CRITICAL
18. Placement New Equipment      Continues                         CRITICAL
20. Special Equip Relocation     Continues                         <= 20% slack
64. Post Requirements            Continues                         CRITICAL
19. LOG Cat C Equipment          Continues                         CRITICAL
35A. Furniture (Buy)             Continues
12. Fire Extinguishers           Continues                         CRITICAL
36. Artwork Oklahoma             Continues                         CRITICAL
37. Artwork Generic              Continues                         CRITICAL
59. ADP System                   Continues                         CRITICAL
21. Administrative Shuttle       Continues                         CRITICAL
03. Physical Security            Continues                         CRITICAL
22. Maintenance Contract         Continues
46A. Infectious Waste            Continues
16A. Equipment Turn In           Continues
55. P A System                   Continues                         <= 20% slack
60. Closed Circuit TV            Continues                         CRITICAL
58. Hospital Music               Continues
24. Materiel Dist Sys (MDS)      Continues                         CRITICAL
11. Ash Cans                     Continues                         <= 20% slack
17. Redistribute Excess Equip    Continues                         CRITICAL
41. CAPOC                        Continues                         CRITICAL
42. Drug Distribution            Starts      28-Apr-88  8:00am     CRITICAL
```

TIME LINE Status Report

APPENDIX L

MTT Monthly Progress Report

DISPOSITION FORM

For use of this form, see AR 340-15; the proponent agency is TAGO.

REFERENCE OR OFFICE SYMBOL	SUBJECT
HSUA-HQ	Major Transition Task Monthly Progress Report

TO	FROM	DATE	CMT 1
_____	DCA	_____1988	
		MAJ Forsythe/sbt/3522	

Report to the MEDDAC Transition Committee on the progress of the Major
Transition Tasks assigned to you. For reference, see the attached Timeline.
Reply on the CMT 2 endorsement outlined below. Use a continuation sheet only
if necessary. Request your report be submitted to MAJ Forsythe (Box 59,
MEDDAC) NLT the 30th of this month.

Encl   JACK E. BRADFORD
                                        COL, MS
                                        Deputy Commander for
                                            Administration

HSUA-___

TO: TRANSITION COMM.   FROM: CMT 2

This is the subject progress report for MTTs number _____
_____, as of _____ 198_.

    a. The following MTTs and their subtasks are on schedule:

    b. The following MTTs and their subtasks are NOT on schedule. The
reasons for delay are noted, as well as the corrective action planned:

    c. Any action needed to be taken by other Action Officers or by the
Transition Committee is as follows:

APPENDIX M

Sample Transition Committee Agenda and Minutes

AGENDA

TRANSITION COMMITTEE MEETING   5 APRIL, 1988

OLD BUSINESS

1. Review of Minutes   All

2. Logistics Update   MAJ Canella

    a. BLIC F Requests (MEDCASE Subcommittee)

    b. Maintenance Contract

3. RMD Update   LTC Sheets

    -   Space Allocation in Bldg. 4700 - MTT # 49
        Progress Report on Cost Estimates

4. Transition Tasks   CPT Ward

    a. MTT Monthly Status Reports

    b. Comments on Automation Plan

    c. MTT Timeline

5. Change Order Status   CPT Watts

NEW BUSINESS

6. Telephone Switch Coordination   Ms. Banks

7. Change Order Request   CPT Chance

8. Problem Statement from RMD   LTC Sheets

9. Next Meeting: 3 May, 1988   0900 hrs   HFPO Conference Room

MINUTES OF TRANSITION COMMITTEE

Administrative Information

A.   The Transition Committee Meeting was held at 0900 hours on 5 April 1988 in the Health Facility Project Office (HFPO) Conference Room.

B.   Members present:

    COL Jack E. Bradford, DCA/Chairman
    COL Dorothy J. Clark, C, DON
    LTC David L. Sheets, C, RMD
    MAJ James J. Canella, C, LOG
    CPT John T. Watts, C, HFPO
    CPT Barbara A. Wilson, C, CSD

C.   Members absent:

    COL Rafael Linares, DCCS
    MAJ Melissa Forsythe, Nurse Project Officer/Recorder (TDY)

D.   Non-Members Present:

    MAJ George R. Wise, C, PTM&S
    CPT Keith L. Ward, Administrative Resident/Acting Recorder
    CPT Mark Silkwood, C, Property Mgt Branch
    Frank Unsicker, AMO
    Janice E. Dodd, DOL

II. Old Business

A.   Review of Minutes: Minutes of the 1 March 1988 meeting were reviewed and approved with the following correction:

Page 3, Para. d, line 8 should say "MAJ Forsythe will be responsible..."

B.   Logistics Update: MAJ Canella presented the following items:

(1) MEDCASE BLIC F Procurement: The MEDCASE subcommittee has met three times to consider equipment requests. The summary of approved equipment (Encl 1) shows only those items of equipment that have been either already approved by the Transition Committee or validated by the MEDCASE subcommittee. Those items not yet validated are not on the list. Below the horizontal line on the second page are the items to be approved by the Transition Committee today. A motion was made, seconded, and passed that the committee approve the action of the MEDCASE subcommittee as listed. CPT Watts voiced his concern about the ultimate total and the need to obligate funds by July 1988 for acquisition of the equipment. MAJ Canella said two more meetings of the subcommittee would be sufficient to validate the remaining expected requirements. He stated that the subcommittee was very thorough in its approval process.

(2) Maintenance Contract: DOL no longer objects to the cost-plus maintenance contract and is back in. Also, in a meeting which included Mr. Hergenrather, Mr. Waller, Mr. Webster and MAJ Canella, it was agreed that the DEH will place the self-help tasks in the maintenance contract on a non-reimbursable basis at no additional cost to the MEDDAC. Also, the maintenance contract Quality Assurance plan is now being written by DRM. Mr. Webb is attending a meeting at this time to discuss this QA plan before it is staffed.

(3) MTT Timeline: MTT 22 Housekeeping Contract and MTT 23 Trash Removal are both already included in the Maintenance Contract. He recommended that both these MTTs be deleted and this was approved by the committee. The project timeline will reflect MTT 22 as Maintenance Contract so that is can still be tracked on the timeline. Also, MTT 15 and MTT 24 are both titled Materiel Distribution System (MDS). MTT 24 is the correct number for MDS. MTT 15 will be combined into MTT 21 and this hybrid will be entitled Administrative Shuttle with the IMO as the Action Officer. This action was also discussed and approved by the committee. MAJ Forsythe or CPT Ward will provide an update of the Timeline and MTT listing for the next meeting.

(4) Vehicular Requirements: He discussed the need for vehicular support for MTT 21 Administrative Shuttle. This requirement is in addition to the Post Shuttle Bus which involves transport of people only. He has already been in contact with Mr. Davis at the Post TMP concerning the Post Shuttle Bus route. Mr. Davis is to come to the next meeting of the Transition Committee to discuss the location and frequency of scheduled stops and the route. CPT Watts said that there is a bus stop at the north end of the building. MAJ Canella is to contact him (Mr. Davis, DOL) for the next meeting.

(5) Vending Machine Operations: He recommended to the committee that space for vending machines be put into the plans. He proposed an area in the basement near Room GD171 for vending. He advocated one centralized vending area rather than machines all over the facility. AAFES should put a proposal together and present it to us. COL Bradford expressed his concern that AAFES may not want to bear the expense even though it is their responsibility to furnish the utility outlets and to keep the area cleaned. CPT Watts stated that AAFES would most likely go for it rather than be excluded from the facility for 5 years. AAFES has provided MAJ Canella a potential layout and a list of items to be vended from the machines. MAJ Canella will have an update at the next meeting.

C. Resource Management Division Update: LTC Sheets discussed Space Allocation in Building 4700 (Enclosure 2). RMD has redrawn the affected areas based on the approved user requests. The Safety Officer has reviewed the proposed changes for fire and safety considerations. RMD has requested the cost estimates from DEH. COL Clark asked if there was a request from the Infection Control Nurse and from Nursing Education and Staff Development have additional space where Pediatrics Clinic is now located. LTC Sheets

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not sure if the request had been received. He will check on this for the next meeting.

D. MAJ Transition Task (MTT) Plans: MTT Monthly Progress Reports were submitted by IMO, HPPO, Environmental Science Officer, RMD, Lab, Personnel, and Logistics for MTTs which have already started. Of those submitted, all were on schedule except for MTT 55 Public Address System and 58 Hospital Music System. The delay was in finding vendors on the GSA contract. CPT Watts stated that these systems are being provided in the construction contract and that CPT Chance does not need to arrange equipment procurement but rather to determine policies for use, access to the PA, zone or system address, etc. CPT Chance needs to talk with CPT Watts on his return from TDY. The next Monthly Progress Report will address this issue again.

CPT Ward announced that the MTT Action Plans initially submitted have been placed on the word processor. This provides the opportunity for all Action Officers to obtain a copy of their MTT Action Plan, make corrections if needed and have the update returned to them as a viable tool to help in accomplishing their MTTs. These corrections could also be used to update the MTT Timeline.

CPT Watts stated that he plans to ask the Corps of Engineers at the next Quarterly Management Meeting for an update to the Beneficial Occupancy Date (BOD). It currently is mid-June (1989), but the contractor is making such d progress that the BOD may be before what is currently planned. He ced that this will seriously affect Transition Planning efforts; thus, he will report on the BOD date after the May Quarterly Management Meeting.

E. Automation Plan: Frank Unsicker stated he had received comments from Logistics and the HPPO on the Automation Plan. He said he would incorporate the comments and distribute the Automation Plan again at the next Transition Committee Meeting.

F. Change Order Status: CPT Watts stated that ECP #1 was on hold to have the Urology X-Ray equipment included in the radiology package. The urology project is to be completed during the Retrofit Stage as a turn-key operation using project money. Otherwise, we are in good shape on the number of ECPs (Enclosure 3).

III. New Business

A. Telephone Switch Coordination: Kathy Banks from DOIM was absent due to illness and was unable to provide the briefing on the telephone switch. COL Bradford stated that he had received a letter form the DOIM that he was hoping would be explained by the DOIM representative today. CPT Watts mentioned that DOIM is having a problem making our phone system compatible with the Post phone system. He further stated that a "black box" was needed for the two systems to communicate with each other and if we could get this problem fixed for $90,000, it would be the least expensive change of this rt ever.

B. Change Order Request: ECP #12 (Enclosure 4) is over the $1,000 ..mit to have the HFPO local approval. Since the carpet is already purchased for Room 2A127, CPT Watts recommended that we let it happen and then protect the carpet with plastic covering and save $1,230. The decision was to keep the carpet as planned and to disapprove the ECP.

C. Problem Statement from RMD: LTC Sheets discussed his concern with obtaining entrance to the new building after normal duty hours (Enclosure 5). There will undoubtedly be hospital personnel without keys who will require admission to the facility after hours. MAJ Wise stated this was a consideration in his planning for the MTT on Physical Security. The consensus of the committee was that initially the AOD will come from Building 4700 to let people in as necessary. It was further discussed that we will strongly discourage hospital personnel from coming back in after normal duty hours. Getting out will not be a problem for those who have to work late. We will start out with a firm policy on after-hours entrance before we reconsider the policy.

IV. Issues/Actions Pending

A. MAJ Forsythe or CPT Ward is to provide an updated Timeline and MTT Listing for the next meeting.

B. MAJ Canella is to contact Mr. Davis from DOL to attend the next ting.

C. MAJ Canella is to provide an update on Vending Machine placement at the next meeting.

D. LTC Sheets is to check on the status of Space Allocation Requests from Infection Control and NESD and provide an update at the next meeting.

E. CPT Chance is to coordinate actions on MTTs 55 and 58 (Public Address and Hospital Music Systems) with CPT Watts.

F. Frank Unsicker will distribute updated copies of the IMO Automation Plan at the next meeting.

G. CPT Watts will report on the status of BOD after the Quarterly Management Meeting in May.

H. Kathy Banks is to provide a briefing on the telephone switch coordination.

VI. Adjournment:

The meeting adjourned at 1008 hours.
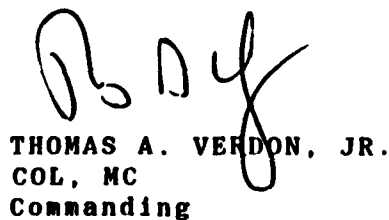
VII.Next Meeting:

The next committee meeting will be held 3 May, 1988 in the HFPO conference Room at 0900 hours.

JACK E. BRADFORD
COL, MS
Deputy Commander for Administration
and Chairman

KEITH L. WARD
CPT, MS
Administrative Resident/Acting Recorder

APPROVED/DISAPPROVED

THOMAS A. VERDON, JR.
COL, MC
Commanding

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                                        87              88                        89
                            Mar Apr May Jun  Jul Aug Sep  Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  No.
                  Who    Status 2  1   1   1    1   3   1    1   2   1   4   1   1    1   2   1   1   1    1   3   1   1   3    1 1   3    1   1   3   1   1   2   1
```

Task	Who	Status
Construction Period		C
57. Facsimile System	IMO	
48. Transition Funding	RMO	
51. Personnel Stabilization	Personnel	
52. Bulletin Boards	Personnel	
47. Transition Staffing	RMO	
49. Space Alloc Old Hospital	RMO	
50. Space Alloc New Hospital	RMO	
20. Vending Machines	Logistics	
45. Specimen Collection Sta.	Pathology	
56. Telephone System	IMO	
61. Beeper System	IMO	
28. Special Equip Relocation	Logistics	
18. Placement New Equipment	Logistics	
64. Post Requirements	DCA	
35A. Furniture (Buy)	HFPO	
19. LOG Cat C Equipment	Logistics	
12. Fire Extinguishers	Safety	C
36. Artwork Oklahoma	DCA	
37. Artwork Generic	HFPO	
59. ADP System	IMO	C
21. Administrative Shuttle	Logistics	
03. Physical Security	POT&S	C
22. Housekeeping Contract	Logistics	
46A. Infectious Waste	Prev Med	
16A. Equipment Turn In	Logistics	
55. P A System	IMO	
60. Closed Circuit TV	IMO	C
58. Hospital Music	IMO	
24. Material Dist Sys (MDS)	Logistics	
11. Ash Cans	Safety	C
17. Redistribute Excess Equip	Logistics	
41. CAPOC	CSD	C
42. Drug Distribution	Pharmacy	C
39. Patient Appt System	CSD	C
09. Fire/Safety Plan	Safety	C
44. Morgue Operations	Pathology	C
14. Shuttle Bus	Logistics	C
35B. Furniture (Ship)	HFPO	C
32. Policies/SOPs	Admin Res	C
33. Dedication Ceremony	Admin Res	C
38. Patient Rep/Info Desk	CSD	C
13. Parking	Safety	C
27. Linen Distribution	Logistics	C
30. Patient Info Booklet	NPO	C
34. Signage Placement	HFPO	
01. Key Control	POT&S	C
40. Red Cross	CSD	C
23. Trash Removal	Logistics	C
Contract Complete		
Contract Growth Time		C
04. Revise EPP	POT&S	
07. Equip/Systems Training	POT&S	C
25. Equip/Systems Test	Logistics	C
43. Pharmacy Stock	Pharmacy	C
54. Patient Distress System	DON	C
31. Publicity Program	NPO	C
06. Move SQT Lab	POT&S	
35C. Furniture (Delivery)	HFPO	
Beneficial Occupancy		pp
16B. Equipment Turn In	Logistics	C
Retrofit/Transition Phase		pC
46B. Infectious Waste Equip.	Prev Med	C
Hospital Move-In		

```
0 Done                    === Task        - Slack time (==---), or
C Critical                +++ Started task   Resource delay (---==)
R Resource conflict       N Milestone     > Conflict
p Partial dependency
Scale: Each character equals 1 week
```

TIME LINE Gantt Chart Report   Strip 1

```
Schedule Name:    Reynolds Army Comm. Hospital Phase I Transition Plan
Project Manager: CPT Ward 1-2915 / 3206
As of date:      29-Mar-88  9:22am   Schedule File: C:\TLDATA\RACH1GRP
```

Tasks scheduled for this week:

```
Construction Period            Continues                     CRITICAL
57. Facsimile System           Continues                     CRITICAL
48. Transition Funding         Continues
51. Personnel Stabilization    Continues
52. Bulletin Boards            Continues                     <= 20% slack
28. Vending Machines           Continues                     CRITICAL
45. Specimen Collection Sta.   Continues                     CRITICAL
56. Telephone System           Continues                     CRITICAL
61. Beeper System              Continues                     CRITICAL
18. Placement New Equipment    Continues                     CRITICAL
20. Special Equip Relocation   Continues                     <= 20% slack
64. Post Requirements          Continues                     CRITICAL
19. LOG Cat C Equipment        Continues                     CRITICAL
35A. Furniture (Buy)           Continues
12. Fire Extinguishers         Continues                     CRITICAL
36. Artwork Oklahoma           Continues                     CRITICAL
37. Artwork Generic            Continues                     CRITICAL
59. ADP System                 Continues                     CRITICAL
21. Administrative Shuttle     Continues                     CRITICAL
03. Physical Security          Continues                     CRITICAL
22. Housekeeping Contract      Continues
46A. Infectious Waste          Continues
16A. Equipment Turn In         Continues
55. P A System                 Continues                     <= 20% slack
60. Closed Circuit TV          Continues                     CRITICAL
58. Hospital Music             Continues
24. Materiel Dist Sys (MDS)    Continues                     CRITICAL
11. Ash Cans                   Continues                     CRITICAL
17. Redistribute Excess Equip  Starts    1-Apr-88  8:00am    CRITICAL
50. Space Alloc New Hospital   Finishes  31-Mar-88  5:00pm
```

TIME LINE Status Report

TRANSITION COMMITTEE MEETING   3 MAY, 1988
_____

OLD BUSINESS

1. Review of Minutes   All

2. Logistics Update   MAJ Canella

    a. BLIC F Requests (MEDCASE Subcommittee)

    b. Maintenance Contract

    c. Vehicular Requirements - MTT #21

    d. Vending Machine Placement

3. RMD Update   LTC Sheets

    -   Space Allocation in Bldg. 4700 - MTT # 49
        Status of Requests from NESD and Inf. Control

4. Transition Tasks   CPT Ward

    a. MTT Monthly Status Reports

    b. MTT Timeline/Task Listing

5. IMO Update   CPT Chance

    a. Coordination on MTTs #55/58(w/CPT Watts)

    b. Updated IMO Automation Plan

NEW BUSINESS

6. Telephone Switch Coordination   Ms. Banks

7. Next Meeting: 3 May, 1988 0900 hrs HFPO Conference Room

MINUTES OF TRANSITION COMMITTEE

I. Administrative Information

    A. The Transition Committee Meeting was held at 0900 hours on 3 May
1988 in the HFPO Conference Room.

    B. Members present:

        COL Jack E. Bradford, DCA/Chairman
        MAJ James J. Canella, C, LOG
        CPT Charles DeVries, C, CSD

    C. Members absent:

        COL Rafael Linares, DCCS
        COL Dorothy J. Clark, C, DON (ConLv)
        LTC David L. Sheets, C, RMD (TDY)
        MAJ Melissa Forsythe, Nurse Project Officer/Recorder (TDY)
        CPT John Watts, C, HFPO (TDY)

    D. Non-Members Present:

        COL Karol A. Hemmer, DON (IMA)
        LTC Kathryn Deuster, Asst. C, DON (for COL Clark)
        CPT Keith L. Ward, Administrative Resident/Acting Recorder
        CPT Mark Silkwood, C, Property Mgt Branch
        CPT Gerald Chance, IMO
        Janice E. Dodd, DOL - Ft. Sill
        Gary L. Thomson, DOL (Transportation) - Ft. Sill
        Cathey Parrott, RMD
        Carole Mumford, RMD
        Dennis Hergenrather, DEH - Ft. Sill
        Lea Scott, AAFES
        Earnestine Evans, AAFES
        Larisa Hall, DOC - Ft. Sill
        Barbara Jung, CSD
        Sharon B. Taylor, HFPO

II. Old Business

    A. Review of Minutes: Minutes of the 5 April 1988 meeting were
reviewed and approved. The correction to the March 1 meeting was
distributed (Enclosure 1).

    B. Logistics Update: MAJ Canella presented the following items:

        (1) MEDCASE BLIC F Procurement: CPT Silkwood made a motion that the
Transition Committee approve the results of the MEDCASE Transition
Subcommittee actions shown at Enclosure 2. He noted that there were both
approved and disapproved items to consider. The motion was approved. MAJ
Canella stated there was still a considerable number of requirements not yet
submitted. Those BLIC F items considered at the next subcommittee meeting

(probably 21 May) will be the last considered on a routine basis. After that date, only emergency requests will be considered. We are running out of time to obligate funds by July 1988.

(2) Maintenance Contract: The latest version of the maintenance contract by the A/E firm was received last week. It has incorporated the major items except self-help, which still needs to be resolved. Comments are due back May 6. Larisa Hall stated the QA plan is four months overdue from DRM. She expects nothing before late June. The final product must have a local legal review and then a review at TRADOC. DOC is trying for a November 1988 contract award. COL Bradford questioned if overtime would be approved to work on the contract. She replied that DOC has no funds. He asked Carole Mumford if Transition Funds would pay for the overtime. She will check with Martha Langford at MEDDAC, RMD.

(3) Moving/Storage Contract: He is working with DOL on estimates for the Moving/Storage contract. The plan of action is to have users identify the number of pieces of equipment and number of boxes of files, etc., to be moved. CPT Silkwood will send out directions for planning so we know how much tape, boxes, etc., to procure. MAJ Canella expects to have developed a recommended moving sequence schedule by activity for planning purposes. PTM & S also needs this for their security planning.

(4) Vehicular Requirements: Gary Thomson from Transportation Branch, DOL explained that the two Post shuttle bus routes will have a loop extended to circle the new hospital. This would add five minutes to the schedule, which has many changes anyway. DOL is not concerned with the location of the bus stops. The bus will run hourly from 0630 to 1720 with 22 daily departures. Eleven daily departures will be toward Building 4700; the other eleven departures will be in the other direction. COL Bradford commented that this schedule is not going to be acceptable for patients who have to carry their X-rays back to the physician at the clinic. CPT Chance says the Administrative Shuttle will transport X-Rays (and other test results), but will not be able to carry the patient. Mr. Thomson says he cannot provide the service with current resources and commitments without a change in the contract and more money. He says it would cost $30,000 to $60,000 to run a dedicated hospital to clinic shuttle.
MAJ Canella will submit requirements for the Administrative Shuttle to DOL as soon as possible and can discuss them at the next meeting.

(5) Vending Machine Operations: Lea Scott provided MAJ Canella a layout drawing of the proposed vending area in the new hospital. Dennis Hergenrather brought up his concern that there would be a regulatory prohibition against mixing NAF and MCA funds in renovating the vending space. AAFES needs to coordinate with the HFPO, CPT Watts. DEH will keep hands off until consulted by AAFES. Proposed services include vending machines and a hot sandwich/hot dog serving area with both stand-up and sit-down dining. It will be comparable to the area in I-See-O-Hall. COL Bradford clarified that renovation and housekeeping will be the responsibility of AAFES. Also, this will be a "No Smoking" area and cigarettes will

not be sold in vending machines. What we need specifically from AAFES are
design and utility requirements.

(6) Schedule X for MDS: We have received three additional staff
from the 47the Field Hospital to accelerate implementation for MDS to all
units. MAJ Canella said this will help him prepare the Schedule X to request
a manpower increase from HSC. LTC Deuster says we will need at least a
six-month history on which to base a change in requirements/authorizations.

C. Resource Management Division Update: Carole Mumford presented the
following items:

(1) Space Allocation in Building 4700: Carole provided the Space
Utilization DF (Encl 3) which describes action approved to date, by the
Space Utilization Committee. COL Bradford commented that the Occupational
Therapy (OT) space will not go back to DENTAC until we are through with it
(i.e., Phase II occupied). We need to clear up that point because the
drawing attached to this DF indicates OT will be in the Surgical Clinic
after the move to Phase I. It is a cost avoidance for us to defer giving it
back to them. Also, Carole states she has not yet heard from the C, CSD
about whether the preferred location for the CHAMPUS Cachement Area
Demonstration Project Office will be in ENT or the Surgical Clinic. COL
Bradford proposed they be given the space in the ENT Clinic. The committee
agreed to this proposal. The committee also approved the request to have
Nursing Education/Staff Development and Infection Control Nurse relocate to
the old Pediatric Clinic area. COL Bradford further commented that
Community Health Nursing needs to be moved into a permanent building since
Post desires to demolish all the old WWII buildings in use all over post.

Dennis Hergenrather said he needs to consolidate work requests (rather
than the results of each Space Allocation Committee meeting), so he can
perform the cost estimate and get the dollars approved for one project. He
can then break the funding into any number of incremental phases necessary.
He said we should allow 3 months for DEH to design the project, 4 months for
DOC, and 2 to 3 months for the area moves. The movement will not be
centrally planned but will be the responsibility of the operational director
within the area.

COL Bradford asked about the expected future use of Building 4700. Mr.
Hergenrather said that if it were not to be used for hospital mobilization,
it would be an MCA project to renovate it for administrative use by Post.

d. Major Transition Task (MTT) Plans: MTT Monthly Progress. Reports
were submitted by IMO, HFPO, Laboratory, Safety Officer, and PTM & S for
MTTs which have already started. Of those submitted, all were on schedule.
CPT Ward asked Carole if MTT 49, Space Allocation in Old Hospital is
completed. She said it was essentially finished since only 1,500 sq. ft.
remained unassigned in Building 4700.

CPT Ward distributed the current Timeline (Encl 4) and list of tasks
ongoing this week. He explained that use of the Timeline to prepare Monthly

Progress Reports is one way COL Bradford performs the control function
within the transition planning effort. The updated list of Major
Transitional Tasks (Encl 5) was also distributed to committee members.

    e. Automation Plan: CPT Chance distributed the revised Automation
Plan (Encl 6). He explained that micro-computer maintenance contracts were
cost ineffective. The solution is to replace parts as needed and to
maintain spares to use when there is a breakdown. He also addressed the
desire to decrease our reliance on DOIM from our training in word
processing, spreadsheets, and database management. Application development
will be coordinated by the IMO/AMO with development of requirements to
support medical care the responsibility of the user.

    f. IMO Update: CPT Chance reviewed the two MTTs which were addressed
in the minutes of last meeting. He recommended the Public Address System
(MTT 55) be the type controlled by the telephone switch. This will allow
use of the PA from each telephone. We would then administratively control
its use. He plans for training to be provided by video cassette recordings.
Mr. Hergenrather expressed concern for our consideration about maintenance
since DEH is responsible for the PA system and DOIM is responsible for the
telephones.

    The Hospital Music System (MTT 58) is to interface and use the same
amplifier as the PA System. A control center will be used to restrict music
to the desired area.

III. New Business:

    Telephone Switch: Kathy Banks from DOIM was attending the 100% Review
Conference in Oklahoma City and was unable to provide the briefing on the
telephone switch. This will be carried over to the next meeting.

IV. New Issues/Action Items

    a. Carole Mumford is to check with Jimmi Lou in RMD, to see if there
are Transition Funds available for overtime hour for DOC, to continue work
on the Maintenance Contract.

    b. MAJ Canella is to submit requirements for the Administrative Shuttle
to DOL as soon as possible and discuss the outcome at the next meeting.

    c. AAFES is to contact CPT Watts to discuss legal ramifications of NAF
and MCA funds in modifying the area allocated to vending in PH I.

    d. Carole Mumford is to obtain a listing from MAJ Canella/CPT Silkwood
to identify old WWII buildings to be demolished and transfer MEDDAC
personnel in them to a permanent facility, preferably Building 4700 after
areas move into PH I.

    e. Kathy Banks is to provide a briefing on the telephone switch coor-
dination.
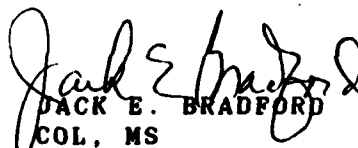
V. Adjournment:

The meeting was adjourned at 1048 hrs.

VII.Next Meeting:

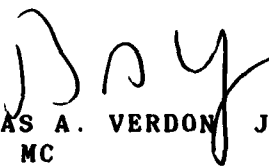The next Transition Meeting will be 7 June 1988 at 0900 hrs.

JACK E. BRADFORD
COL, MS
Deputy Commander for Administration
and Chairman

KEITH L. WARD
CPT, MS
Administrative Resident/Acting Recorder

APPROVED/DISAPPROVED

THOMAS A. VERDON JR.
COL, MC
Commanding

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                                                87                              88                                      89
                                                Mar Apr May Jun  Jul Aug Sep Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov
                                Who    Status   2   1   1   1    1   3   1   1   2   1   4   1   1    1   2   1   1   1    1   3   1   1   3    1  1     3   1   1    3   1   1   2    1

Construction Period                       C    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
57. Facsimile System            IMO       C    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
48. Transition Funding          RMO            +++++++++++++++++++  ++++++++++++++++++++++++++++++++++++++++++++++++
51. Personnel Stabilization     Personnel      . .    ++++++++++++++++++++++++++++++++++++++++++++++++++++
52. Bulletin Boards             Personnel      . . .   ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
47. Transition Staffing         RMO       D    . . .   ==========================  .        |
49. Space Alloc Old Hospital    RMO       D    . . .   =============================   .    |
50. Space Alloc New Hospital    RMO            . . .   ++++++++++++++++++++++++++++++++++++++. |
28. Vending Machines            Logistics C    . . .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
45. Specimen Collection Sta.    Pathology C    . . .     ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
56. Telephone System            IMO       C    . . .     ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
51. Beeper System               IMO       C    . . .     ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
20. Special Equip Relocation    Logistics      . . .     .   ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
18. Placement New Equipment     Logistics C    . . .     .   ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
64. Post Requirements           DCA       C    . . .     .   ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
35A. Furniture (Buy)            HFPO           . . .     .   +++++++++++++++++++++++++++++++++++++++++
19. LOG Cat C Equipment         Logistics C    . . .     .   ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
12. Fire Extinguishers          Safety    C    . . .     .   .+++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
36. Artwork Oklahoma            DCA       C    . . .     .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
37. Artwork Generic             HFPO      C    . . .     .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
59. ADP System                  IMO       C    . . .     .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
21. Administrative Shuttle      IMO       C    . . .     .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
03. Physical Security           POT&S     C    . . .     .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
22. Maintenance Contract        Logistics      . . .     .   .  +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
46A. Infectious Waste           Prev Med       . . .     .   .  +++++++++++++++++++++++++++++
16A. Equipment Turn In          Logistics      . . .     .   .  +++++++++++++++++++++++++++++++++++
55. P A System                  IMO            . . .     .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
60. Closed Circuit TV           IMO       C    . . .     .   .  .++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
58. Hospital Music              IMO            . . .     .   .  . ++++++++++++++++++++++++++++++++++++++++++++++++++++
24. Materiel Dist Sys (MDS)     Logistics C    . . .     .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
11. Ash Cans                    Safety         . . .     .   .   .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
17. Redistribute Excess Equip   Logistics C    . . .     .   .     .  +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
41. CAPOC                       CSD       C    . . .     .   .     .  +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
42. Drug Distribution           Pharmacy  C    . . .     .   .     .     ==========================================================
39. Patient Appt System         CSD       C    . . .     .   .     .     |. =====================================================
09. Fire/Safety Plan            Safety    C    . . .     .   .     .     |.  =====================================================
44. Morgue Operations           Pathology C    . . .     .   .     .     |.  ==================================================
14. Shuttle Bus                 Logistics C    . . .     .   .     .     |.   ================================================
35B. Furniture (Ship)           HFPO      C    . . .     .   .     .     |.    =============================
32. Policies/SOPs               Admin Res C    . . .     .   .     .     |.      ====================================
33. Dedication Ceremony         Admin Res C    . . .     .   .     .     |.      ====================================
38. Patient Rep/Info Desk       CSD       C    . . .     .   .     .     |.        ==============================
13. Parking                     Safety    C    . . .     .   .     .     |.        . ============================
27. Linen Distribution          Logistics C    . . .     .   .     .     |.          ===========================
30. Patient Info Booklet        NPO       C    . . .     .   .     .     |.          ================================
34. Signage Placement           HFPO      C    . . .     .   .     .     |.          ================================
01. Key Control                 POT&S     C    . . .     .   .     .     |.           ============================
40. Red Cross                   CSD       C    . . .     .   .     .     |.           ============================
Contract Complete                              . . .     .   .     .     |.                    M
Contract Growth Time                      C    . . .     .   .     .     |.                    =================
04. Revise EPP                  POT&S     C    . . .     .   .     .     |.                    =================
07. Equip/Systems Training      POT&S     C    . . .     .   .     .     |.                     ==================
25. Equip/Systems Test          Logistics C    . . .     .   .     .     |.                      . =================
43. Pharmacy Stock              Pharmacy  C    . . .     .   .     .     |.                       ================
54. Patient Distress System     DON       C    . . .     .   .     .     |.                          =====
31. Publicity Program           NPO       C    . . .     .   .     .     |.                       ================
06. Move SQT Lab                POT&S     C    . . .     .   .     .     |.                        ==============
16B. Equipment Turn In          Logistics C    . . .     .   .     .     |.                         ============
35C. Furniture (Delivery)       HFPO      C    . . .     .   .     .     |.                         =============
Beneficial Occupancy                      pp   . . .     .   .     .     |.                    M
Retrofit/Transition Phase                 pC   . . .     .   .     .     |.                      .============
46B. Infectious Waste Equip.    Prev Med  C    . . .     .   .     .     |.                              =====
Hospital Move-In                          C    . . .     .   .     .     |.                            .M
```

D Done   === Task   - Slack time (==---), or
C Critical   +++ Started task   Resource delay (---==)
R Resource conflict   M Milestone   > Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report   Strip 1

Schedule Name: Reynolds Army Comm. Hospital Phase I Transition Plan
Project Manager: CPT Ward 1-2915 / 3206
As of date: 27-Apr-88 3:14pm   Schedule File: C:\TLDATA\RACHIGRP

Tasks scheduled for this week:

Task	Status		
Construction Period	Continues		CRITICAL
57. Facsimile System	Continues		CRITICAL
48. Transition Funding	Continues		
51. Personnel Stabilization	Continues		
52. Bulletin Boards	Continues		<= 20% slack
28. Vending Machines	Continues		CRITICAL
45. Specimen Collection Sta.	Continues		CRITICAL
56. Telephone System	Continues		CRITICAL
61. Beeper System	Continues		CRITICAL
18. Placement New Equipment	Continues		CRITICAL
20. Special Equip Relocation	Continues		<= 20% slack
64. Post Requirements	Continues		CRITICAL
19. LOG Cat C Equipment	Continues		CRITICAL
35A. Furniture (Buy)	Continues		
12. Fire Extinguishers	Continues		CRITICAL
36. Artwork Oklahoma	Continues		CRITICAL
37. Artwork Generic	Continues		CRITICAL
59. ADP System	Continues		CRITICAL
21. Administrative Shuttle	Continues		CRITICAL
03. Physical Security	Continues		CRITICAL
22. Maintenance Contract	Continues		
46A. Infectious Waste	Continues		
16A. Equipment Turn In	Continues		
55. P A System	Continues		<- 20% slack
60. Closed Circuit TV	Continues		CRITICAL
58. Hospital Music	Continues		
24. Materiel Dist Sys (MDS)	Continues		CRITICAL
11. Ash Cans	Continues		<= 20% slack
17. Redistribute Excess Equip	Continues		CRITICAL
41. CAPOC	Continues		CRITICAL
42. Drug Distribution	Starts	28-Apr-88 8:00am	CRITICAL

TIME LINE Status Report

AGENDA

TRANSITION COMMITTEE MEETING	7 JUNE, 1988

OLD BUSINESS

1. Review of Minutes   All

2. Logistics Update   CPT Silkwood

    a. BLIC F Requests (MEDCASE Subcommittee)

    b. Maintenance Contract

    c. Vehicular Requirements - MTT #21

    d. Vending Machine Placement/Use of NAF w/ MCA Funds

3. RMD Update   Ms. Mumford

    a. Transition Funds for DOC overtime

    b. WWII Building Demolition

4. Transition Tasks   MAJ Forsythe

    a. MTT Monthly Status Reports

    b. MTT Timeline/Task Listing

NEW BUSINESS

5. Telephone Switch Coordination   Ms. Banks

6. Problem Statement   MAJ Forsythe

7. Next Meeting: 5 July, 1988   0900 hrs   HFPO Conference Room

MINUTES OF TRANSITION COMMITTEE

I. Administrative Information

   A. The Transition Committee Meeting was held at 0900 hours on 7 June
1988 in the HFPO Conference Room.

   B. Members present:

       COL Jack E. Bradford, DCA/Chairman
       MAJ Melissa Forsythe, NPO/Recorder
       CPT Mark Silkwood, C, Log

   C. Members absent:

       COL Rafael Linares, DCCS (LV)
       COL Dorothy J. Clark, C, DON
       CPT Charles DeVries, C, CSD (TDY)
       CPT John Watts, HFPO (LV)

   D. Non-Members Present:

       LTC Kathryn Deuster, Asst. C, DON (for COL Clark)
       MAJ George Wise, C, PTMS
       CPT Keith L. Ward, Administrative Resident
       CPT Gerald Chance, IMO
       Carole Mumford, RMD (for C, RMD)
       Cathey Parrott, RMD
       Dennis Hergenrather, DEH - Ft. Sill
       Larisa Hall, DOC - Ft. Sill
       Barbara Jung, CSD (for CPT DeVries)

II. Old Business

   A. Review of Minutes: Minutes of the 3 May 1988 meeting were reviewed
and approved, with one exception. Ms. Larisa Hall pointed out that page 2,
paragraph (2), should read "...final PWS is four months overdue from DEH."

   B. Logistics Update: CPT Silkwood presented the following items:

       (1) MEDCASE BLIC F Procurement. CPT Silkwood distributed a handout
(Enclosure 1) showing the most recent approvals by the MEDCASE Transition
Subcommittee. He moved for its acceptance. The motion was seconded and
approved. CPT Silkwood noted that this brings the total of BLIC F requests
to over $4 million dollars. The issue of requirements for the R & U Shop
was addressed. COL Bland at HSC originally disapproved the R&U BLIC F re-
quirements. COL Bradford said that now, COL Bland understands we will be
operating out of two facilities, and he will re look our requirements. CPT
Silkwood will resubmit the MEDCASE MPRs for the R & U Shop to HSC.

CPT Chance asked what should be done when HSC Consultants call about a specific MPR, which they question. He cited as an example the facsimile MPR, which he was called about. COL Bradford said that any disapproval should be put in writing, and returned to Property Management; then we'll refute their disapproval. MAJ Forsythe asked if it wasn't HSC who was responsible for disapproving the request on the Bus Interface Units needed to access the LAN system; CPT Chance said yes. COL Bradford directed CPT Chance to see him after the meeting about this situation.

(2) Maintenance Contract. The final version of the Maintenance Contract by the A/E firm (dated 25 May) was received just today, and is being reviewed. Dennis Hergenrather stated that he will send this on to Huntsville for procurement action. Larisa Hall stated that DOC has gone to TRADOC (see Enclosure 2) for permission to "Offload" this contract to Huntsville, but for DOC to administer it after award. This may be a problem area with TRADOC. If DOC cannot obtain TRADOC's approval, Huntsville will be out of the picture, as they can only let the contract, not administer it as well. She noted that some staff members are coming tommorrow from Huntsville to meet with DEH, but that she may not have an answer for them. She will, however, call TRADOC again today.

(3) Vehicular Requirements. A handout (Enclosure 3) was distributed which lists a compilation of all identified vehicular requirements for areas going into Phase I. Discussion ensued about the difference in duration times of the requirements, and whether or not some of these would be covered by the moving contractor. COL Bradford asked about a consolidation of actual needs, and CPT Silkwood stated this document did not identify any such consolidation. He will verify with each activity their intention for requesting a vehicle.

(4) Vending Machine Operations. CPT Silkwood said he talked with Mr. Fogel and Ms. Scott from AAFES, who had not called CPT Watts. MAJ Forsythe said that there was not any problem with AAFES using Non-Appropriated Funds to provide a vending area in Phase I, as this did not constitute a "Supplementation" of the MCA construction funds. Dennis Hergenrather said then he was satisfied, as long as we were convinced it was not a legal issue. However, he noted that DEH still has not seen any plans for the proposed facility, though these were given to MAJ Canella (as a rough draft) at the last Transition Committee Meeting. CPT Silkwood will contact AAFES to make sure they coordinate with DEH.

C. Resource Management Division Update: Carole Mumford presented the following items.

(1) Transition Funds for DOC Overtime. Carole said RMD didn't have any funds available. But Larisa Hall said that even if they were available, they wouldn't help, as overtime on DOC's part would not change the time frame for getting the Maintenance Contract completed anyway.

(2) World War II (WWII) Building Demolition. In response to a prior
DF from DEH, RMD is writing a decision paper for the Chief of Staff. This
will state that the MEDDAC cannot possibly give up their outlying buildings
until we occupy Phase I. Dennis Hergenrather said that now the Commanding
General wants a listing of all WWII buildings and DEH's recommendation for
time of disposal. He asked Ms. Mumford to give DEH a list of the MEDDAC's
WWII buildings, with a specific recommendation for each one as to when they
could be demolished. COL Bradford stated this should be a part of the
Decision Paper. Ms. Mumford will see to it.

(3) Space Utilization in Bldg. 4700. Handout 4 was passed out by
Ms. Mumford. This explains a new space request made by the MEDDAC Chaplain
for additional room on the fifth floor after Phase I is occupied. The
committee discussed the proposal and accepted it as written.

D. Major Transition Task (MTT) Plans:

(1) MTT Monthly Status Reports. MAJ Forsythe distributed a new
Monthly Status Report Tracking System (Enclosure 5), which identifies all
the current MTTs and their Action POC; by month it will show all the tasks
that are on time, late, or those for which no report was received from the
POC. The committee agreed to keep the status reports on a monthly basis.
MAJ Forsythe will be responsible for contacting those Action Officers who
have not turned in reports for the past month.

(2) MTT Timeline/Task Listing. The latest Timeline Gantt chart was
given out (Enclosure 6). MAJ Forsythe explained that task #39 - Patient
Appointment System, for which CSD is the Action POC, should have started two
weeks ago in order to finish on time, and two more tasks, #09 - Fire/Safety
Plan (Safety Officer is the POC), and #44 - Morgue Operations (Lab Officer
is the POC) both need to start next week to stay on schedule. MAJ Forsythe
will notify these Action Officers.
MAJ Forsythe noted that some changes in the Action Officers had been
proposed. The first of these, the HFPO asked that responsibility for #35A,
B, and C (Furniture - Buy, Ship, Delivery) shift to Property Management, as
his involvement with the furniture palette has ended. The second was from
MAJ Stearns, who requested Property Management also take further action
regarding #52 (Bulletin Boards), because this item has been sent out for
procurement. CPT Silkwood agreed to both, and the committee concurred. MAJ
Stearns proposed that MTT #51 - Personnel Stabilization, had been placed on
indefinite hold, and no further action was required. COL Bradford stated
that this task was in hiatus for the summer, but was not completed; the new
Personnel Officer will take the action when he reports for duty next month.
MAJ Forsythe will notify MAJ Stearns of this decision.

III.New Business:

A. Telephone Switch. Kathy Banks from DOIM was unavailable for the

third time to brief the committee on the telephone switch coordination
problems. Discussion of the problem ensued. COL Bradford asked what the
newest information was. MAJ Forsythe said that at the last Quarterly
Management Meeting in May, it was discussed that the cost was now going to
be in the range of $110 to $125 Thousand dollars (higher than previously
noted) and that Mr. Vincent had asked for more information on how to tie the
additional trunk lines directly into downtown, bypassing the Dial Central
Office. She was unsure just exactly who was to provide this information;
COL Bradford requested MAJ Forsythe find out and let him know. Dennis
Hergenrather stated the problem as he understood it was not with the new
hospital's switch, but rather with the connection into the Post's equipment.
The committee also identified two further points of concern: the DOIM has
never clarified how they intend to "piggy-back" onto the new switch without
degrading service, and if the Post's equipment will be upgraded before this
same problem affects Phase II as well. The committee decided that this
briefing by DOIM was needed now more than ever, but concern was voiced over
how long it was going to take before an actual presentation occurred. COL
Bradford said that he would call Mr. Kehoe, the Director of the DOIM, and
get some answers.

    B. Problem Statement. MAJ Heath, Chief of the Pharmacy, submitted a
Problem Statement Form (Encl 7) in which he expressed concern about individ-
ual areas needing to procure equipment for janitorial closets in Phase I.
He suggested that these items should be made into a group purchase. Per a
comment 2, Mr. Webb, Chief, Services Branch, stated on the form these areas
will fall under the exclusive jurisdiction of the Housekeeping Contractor,
and MEDDAC personnel should not have access to them. The committee accepted
Mr. Webb's recommendation, and will not need to procure these items. MAJ
Forsythe will thank MAJ Heath for identifying a potential problem.

    C. After Hours Access into Phase I. Ms. Mumford reintroduced this topic,
which was discussed at the last meeting. She wanted to know if this had
been finalized by the committee. COL Bradford said that staff were not
generally going to be allowed access into the building after hours. Ms.
Mumford stated that in RMD they very often work later than normal, or might
need to enter the building on weekends, for example, if the UCA Computers
had trouble. MAJ Wise said exceptions could be handled by the AOD in
Building 4700, but that Grand Master keys were not going to be reproduced
beyond those normally required. It was noted too that this problem would
"go away" when Phase II was completed, as card readers would then be
installed permitting controlled access into both buildings.

IV. New Issues/Action Items Pending:

    a. CPT Silkwood will resubmit the MEDCASE BLIC F MPRs for the R&U Shop.

    b. CPT Silkwood will verify requirements with each activity requesting
a vehicle to see which ones can be consolidated and which will be covered by

the moving contract.
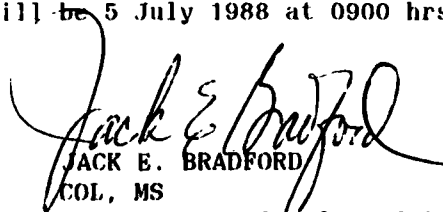
    c. CPT Silkwood will call AAFES to make sure they coordinate with DEH.

    d. Ms. Mumford will include a listing of all MEDDAC World War II Buildings, with specific recommendations for the timing of demolition in the Decision Paper being written for the Chief of Staff.

    e. MAJ Forsythe will contact those Action Officers who did not submit a Status Report for their Major Transition Tasks this past month.

    f. MAJ Forsythe will notify MAJ Stearns in Personnel that MTT #51 will require further action by his replacement.

    g. MAJ Forsythe will find out for COL Bradford who was to provide Mr. Vincent (OCE) with information about tying the hospital's trunk lines directly into the downtown switch, bypassing the Post Dial Central Office.

    h. COL Bradford will contact Mr. Kehoe, Director of DOIM, to arrange the briefing on the telephone switch coordination problem.

    i. MAJ Forsythe will respond to the Problem Statement from MAJ Heath and thank him for identifying a potential problem.

V. Adjournment:

    The meeting was adjourned at 1000 hrs.

VII.Next Meeting:

    The next Transition Meeting will be 5 July 1988 at 0900 hrs.

                                   JACK E. BRADFORD
                                   COL, MS
                                   Deputy Commander for Administration
                                   and Chairman

MELISSA A. FORSYTHE
MAJ, AN
Nurse Project Officer/Recorder

APPROVED/DISAPPROVED

THOMAS A. VERDON, JR.
COL, MC
Commanding

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                                              87                                    88                                    89
                                          Mar Apr May Jun  Jul Aug Sep  Oct Nov Dec Jan Feb Mar  Apr May Jun Jul Aug  Sep Oct Nov Dec Jan  FebMar  Apr May Jun  Jul Aug Sep Oct  Nov
                          Who    Status 2  1   1   1    1   3   1    1   2   1    4   1   1    1   2   1   1    1   3   1   1   3    1   1    3   1   1    3   1   1   2    1

Construction Period                  C  +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++.
57. Facsimile System      IMO        C  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
48. Transition Funding    RMD           ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
51. Personnel Stabilization Personnel        . . +++++++++++++++++++++++++++++++++++++++++++++++|
52. Bulletin Boards       Personnel          . . +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
49. Space Alloc Old Hospital RMD     D       . . ==================================            .   |
50. Space Alloc New Hospital RMD     D       . . =============================================.   |
47. Transition Staffing   RMD               . . +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
28. Vending Machines      Logistics  C        . . . +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
45. Specimen Collection Sta. Pathology C      . . . +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
56. Telephone System      IMO        C        . . . +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
61. Beeper System         IMO        C         . . . +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
20. Special Equip Relocation Logistics         . . .  ++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
18. Placement New Equipment Logistics C        . .  +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
64. Post Requirements     DCA        C         . .  +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
35A. Furniture (Buy)      HFPO                 . .   ++++++++++++++++++++++++++++++++++++
19. LOG Cat C Equipment   Logistics  C          . .   +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
12. Fire Extinguishers    Safety     C          . .   .+++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
36. Artwork Oklahoma      DCA        C          . .    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
37. Artwork Generic       HFPO       C          . .    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
59. ADP System            IMO        C          . .    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
21. Administrative Shuttle IMO       C          . .    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
03. Physical Security     POT&S      C          . .    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
22. Maintenance Contract  Logistics               . .  +++++++++++++++++++++++++++++++++++++++++++++++++++
46A. Infectious Waste     Prev Med                . .  ++++++++++++++++++++++
16A. Equipment Turn In    Logistics              . .   ++++++++++++++++++++++++++++++
55. P A System            IMO                    . .   ++++++++++++++++++++++++++++++++++++++++++++
60. Closed Circuit TV     IMO        C           . .   .+++++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
58. Hospital Music        IMO                     . .   ++++++++++++++++++++++++++++++++++++
24. Material Dist Sys (MDS) Logistics C          . .    +++++++++++++++++++++++++++++++++++++++++++++++++++++++++
11. Ash Cans              Safety     C            . .     .+++++++++++++++++++++++++++++++++++++++++++++++++++++++++++
17. Redistribute Excess Equip Logistics C         . .      +++++++++++++++++++++++++++++++++++++++++++++++++++++
41. CAPOC                 CSD        C            . .        +++++++++++++++++++++++++++++++++++++++++++++++++
42. Drug Distribution     Pharmacy   C           . .        +++++++++++++++++++++++++++++++++++++++++++++++++
39. Patient Appt System   CSD        C           . .         ++++++++++++++++++++++++++++++++++++++++++++++++++
09. Fire/Safety Plan      Safety     C           . .          |==============================================
44. Morgue Operations     Pathology  C           . .         !=================================================
14. Shuttle Bus           Logistics  C           . .          | ===================================
35B. Furniture (Ship)     HFPO       C           . .           .| ================================
32. Policies/SOPs         Admin Res  C           . .           .|  =================================
33. Dedication Ceremony   Admin Res  C           . .           .|  =================================
38. Patient Rep/Info Desk CSD        C           . .           .  | =================================
13. Parking               Safety     C           . .            .  | ================================
27. Linen Distribution    Logistics  C           . .            . . | ===============================
30. Patient Info Booklet  NPC        C           . .            . . .| ==============================
34. Signage Placement     HFPO       C           . .            . . . | ============================
01. Key Control           POT&S      C           . .            . . . |  ========================
40. Red Cross             CSD        C           . .            . . . | ========================
Contract Completion Date                         . .            . . .| M
Contract Growth Period               C           . .            . . .   | =================
04. Revise EPP            POT&S      C           . .            . . .   | =================
07. Equip/Systems Training POT&S     C           . .            . . .|   ========================
25. Equip/Systems Test    Logistics  C           . .            . . .      ========================
43. Pharmacy Stock        Pharmacy   C           . .            . . .      ========================
31. Publicity Program     NPO        C           . .            . . .       ================
54. Patient Distress System DON      C           . .            . . .      =====
05. Move SQT Lab          POT&S      C           . .            . . .|       =============
16B. Equipment Turn In    Logistics  C           . .            . . .|       =============
Beneficial Occupancy Date            pp          . .            . . .|       M
Retrofit/Transition Period           C           . .            . . .|       ==============
35C. Furniture (Delivery) HFPO                   . .            . . .|       ==============
46B. Infectious Waste Equip. Prev Med C          . .            . . .|                  =====
Hospital Move-In Date                C           . .            . . .|                     M
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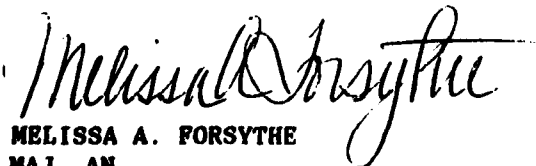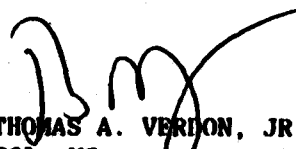

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D Done                  === Task          - Slack time (==----), or
C Critical              +++ Started task    Resource delay (----==)
R Resource conflict     M Milestone       > Conflict
p Partial dependency
Scale: Each character equals 1 week
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AGENDA

TRANSITION COMMITTEE MEETING   5 JULY, 1988

OLD BUSINESS

1. Review of Minutes   All

2. Logistics Update   CPT Silkwood

   a. BLIC F Requests (MEDCASE Subcommittee)

   b. Maintenance Contract

   c. Vehicular Requirements - MTT #21

   d. AAFES Coordination w/DEH

3. RMD Update   Ms. Parrott

   a. Transition Budget Requirements

   b. WWII Building Demolition

4. Transition Tasks   MAJ Forsythe

   a. MTT Monthly Status Reports

   b. MTT Timeline/Task Listing

   c. Miscellaneous

NEW BUSINESS

5. Telephone Switch Coordination   Ms. Banks

6. Engineering Change Proposal   MAJ Forsythe

7. Next Meeting: 2 August, 1988 0900 hrs HFPO Conference Room

MINUTES OF TRANSITION COMMITTEE

I. Administrative Information

    A. The Transition Committee Meeting was held at 0900 hours on 5 July
1988 in the HFPO Conference Room.

    B. Members present:

        COL Jack E. Bradford, DCA/Chairman
        COL Rafael Linares, DCCS
        MAJ Melissa Forsythe, NPO/Recorder
        CPT Mark Silkwood, C, Log

    C. Members absent:

        COL Dorothy J. Clark, C, DON
        CPT Charles DeVries, C, CSD (LV)
        CPT John Watts, C, HFPO (LV)

    D. Non-Members Present:

        LTC Kathryn Deuster, Asst. C, DON (for COL Clark)
        CPT Keith L. Ward, Administrative Resident
        Cathey Parrott, RMD (for C, RMD)
        Barbara Jung, CSD (for CPT DeVries)
        Janice Dodd, DOL - Ft. Sill
        Andrew Kehoe, DOIM - Ft. Sill
        Kathy Banks, DOIM - Ft. Sill

II. Old Business

    A. Review of Minutes: Minutes of the 7 June 1988 meeting were reviewed
and approved as written.

    B. Logistics Update: CPT Silkwood presented the following items.

        (1) MEDCASE BLIC F Procurement. CPT Silkwood distributed a handout
(Enclosure 1) showing the most recent approvals by the MEDCASE Transition
Subcommittee. He moved for its acceptance. The motion was seconded and
approved. CPT Silkwood noted that this brings the total of BLIC F requests
to $4.5 million dollars.

        (2) Maintenance Contract. The Maintenance Contract will now be both
"let" and administered by the Corps of Engineers, with a Contracting
Officer's Representative (COR) on site. Ms. Parrott asked about the
Self-Help items, and whether or not they were going to be included in the
Maintenance Contract. CPT Silkwood said no, they never were included. The
R&U functions will still be performed in-house.

(3) Vehicular Requirements. A handout (Enclosure 2) was distributed
listing the verified requirements for areas going into Phase I. CPT
Silkwood pointed out that the Pharmacy is the only area needing a vehicle
for moving into Phase I, because of their Controlled Substances inventory.
Materiel Branch and the MEDDAC will require the vehicles identified for the
duration of the period between Phase I and Phase II. Some discussion ensued
about the actual move-in date for Phase I; Ms. Dodd needed to know. MAJ
Forsythe explained that the date has not changed, and remains 1 September
1989. Pharmacy may need to have their vehicle around the end of August
1989. Ms. Dodd said she will coordinate with the DOL Transportation
Officer.

(4) Vending Machine Operations. CPT Silkwood provided a DF from
Leon Webb, Chief-Services Branch, stating Ms. Scott of AAFES would attend
this meeting (Enclosure 3). As she did not, CPT Silkwood will get back with
her to make sure DEH is coordinated with as stated. He noted that Ms. Scott
does have the drawings DEH requires.

C. Resource Management Division (RMD) Update: Cathey Parrott presented
the following items.

(1) Transition Funds for FY 89. Martha Langford asked Ms. Parrott
to remind the members all unfinanced Transition Requirements are due to RMD
within the next two weeks, so they can be submitted to HSC in August. She
asked that the sections consider all costs associated with moving into Phase
I, since this will occur during the upcoming fiscal year.

(2) World War II (WWII) Building Demolition. RMD has responded to
DEH with a plan for the demolition timetable of the MEDDAC's buildings. COL
Bradford stated that DEH's plan for the demolition of the MEDDAC's buildings
between Wilson and Hartell and the substitutions they offered were
unacceptable. Specifically, the proposed overflow wards for ARDS patients
were unrenovated WWII buildings without air conditioning. The option DEH
offered for X-Ray storage was in the 3,000 area and unsecurable. Both of
these were unsatisfactory choices.

D. Major Transition Task (MTT) Plans:

(1) MTT Monthly Status Reports. MAJ Forsythe distributed the
Monthly Status Report Tracking System (Enclosure 4), which showed a response
was obtained from all POCs, with the exception of a verbal response from
Pathology (CPT Bass is on leave). There was some confusion noted on the
part of the POCs, who did not all understand that this report would be sent
out monthly. For the month just ending, however, all tasks are on time.

(2) MTT Timeline/Task Listing. The latest Timeline Gantt chart was
presented along with an updated MTT List (Enclosures 5, 6). MAJ Forsythe
explained that two tasks, #49 and 50, Space Allocation, both show as being

2

essentially completed. MTT #51 is not yet finished, so the timeline for
that task will have to be extended; COL Bradford noted that it should be
finalized by this Fall. MTT # 14, Shuttle Bus, must start by 18 July in
order to finish by 1 September 1989. CPT Silkwood noted this.

MAJ Forsythe observed that some changes in the Action Officers had
been approved at the last committee meeting, and these are reflected in the
new MTT Listing, version 1.2b, dated 1 July 1988.

(3) COL Bradford brought to the committee's attention that the
request by the hospital to use a portion of the new facility's basement
prior to Beneficial Occupancy (BOD) had been turned down by the DEH. He
noted that this was going to provide numerous obstacles to the hospital,
most notably in the form of storage costs of approximately $70,000.00
dollars.

III.New Business:

A. Telephone Switch. Mr. Kehoe from DOIM briefed the committee on the
current problems of coordinating the new hospital telephone switch, along
with the meetings held last week to reach a resolution of these problems. He
outlined the basic situation as follows. A new switch is being installed
into the clinic building (it will service both Phase I and II). The
difficulties arose in trying to integrate this new switch with the existing
Post switch. This existing switch was to have been upgraded also, but has
been delayed due to funding restraints; now it does not appear that Post
will receive its new switch until 1994 or 1995 at the earliest. Today the
hospital has about 300 phones, but the new hospital incorporates the "single
line concept", which will increase the lines in Phase II to 1300. Mr. Kehoe
is trying to provide the best service possible at the least cost. Thus he
is opposed to upgrading the existing Post switch, which will save the
three-quarters of a million programmed for that purpose. Mr. Kehoe
identified the proposed solutions to the problem:
            (1) Establishment of a separate phone prefix for the new hospital.
            (2) Bring the old hospital (Bldg. 4700) onto the new switch now, by
pulling 600 pair cables instead of 100 between the two buildings [100-200
pairs will be used for data transmission, leaving sufficient number of pairs
free.]
            (3) Clearance of the "0" level to provide 999 lines for the hospital
to use. This will prevent upgrading to the Post switch, but leaves the
hospital short of some 300 lines. However, this can be managed internally
by the hospital through restriction of service in select areas.
            (4) Tie into some 20 new commercial trunks routed directly into the
"downtown" switch, bypassing the Post switch, thus decreasing the
competition for these lines with the rest of Post. This will include WATS.
The problem remaining is how to provide AUTOVON service via the existing
switch. Getting a new prefix would solve this problem, but that whole
process takes two years or more, so is out of the question. Mr. Kehoe
pointed out that the one other problem is the 20 - 30 thousand dollars in

annual bills the new commercial trunks will generate; this will have to be
payed for out of his Base Ops funds, and he does not have this money avail-
able. He expects to have some answers by 8 July, this Friday.

The other issue surrounding the telephone system concerns the use of
the Broadband versus the use of additional phone cable (twisted pairs) with
a second data outlet co-located on the phone faceplates. The Health
Facility Planning Agency (HFPA) favored the use of the Broadband at the time
of Phase I's design, thus the second outlet was not included. HSC, however,
won't authorize the use of the Broadband system, and will not allow the
MEDDAC to procure those interface units necessary for the system to work.
If the second data outlet system is going to be used in lieu of the
Broadband, then additional cable will need to be installed into Phase I.
The best time to do that, in terms of cost, would be now, before the initial
phone lines are positioned. The subcontractor doing this work said that he
would begin pulling cable on 5 July. That means to have any chance of
providing the additional cable, we must have a resolution to this dilemma
now. MAJ Forsythe noted that both MAJ Salter (HSC, Information Management)
and George Lickman (OCE, Medical Facilities Design Office) are trying to get
the second data outlet concept approved by HFPA/OCE.

B. Engineering Change Proposal (ECP). MAJ Forsythe distributed copies
of ECP #14 (Enclosure 7). There was little discussion, as it was noted
these changes are essentially mandatory for the facility's Warehouse, Brace
Shop, and Audiology Sections to function properly. The estimated cost from
the engineers was $1500.00. COL Bradford stated that this illustrates a
reason for people to look at their areas in the new hospital closely, to be
sure that equipment and utility requirements are going to be met. He did
ask whether coordination had been accomplished with the hospital Safety
Officer and the Post Fire Chief about putting the larger Brace Shop oven
into their storage room, and then also using that same room for storage.
CPT Silkwood will follow-up to provide this coordination.

C. Mr. Kehoe asked how his repairmen would be able to get into the
building after hours once, and if, the old hospital was converted over to
the new switch. COL Bradford said you can't until after BOD, but Mr. Kehoe
said the conversion should be made before then. In that case, COL Bradford
answered he would have to request acceptance of that system before BOD
through the DEH, as the MEDDAC did about the basement Warehouse.

IV. New Issues/Action Items Pending:

a. Ms. Dodd will coordinate the MEDDAC's vehicle requirements with the
DOL Transportation Officer.

b. All members will submit unfinanced Transition requirements to RMD
within the next two weeks.

c. CPT Silkwood will call AAFES to make sure they coordinate with DEH.
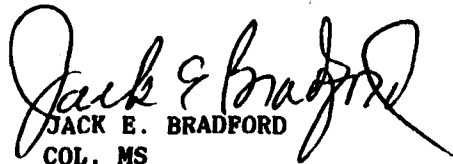
   d. CPT Silkwood will coordinate with the Safety Officer and Post Fire
Chief regarding the placement of the Brace Shop Oven in a room intended for
storage.

V. Adjournment:

   The meeting was adjourned at 1015 hrs.

VII.Next Meeting:

   The next Transition Meeting will be 2 August 1988 at 0900 hrs.

JACK E. BRADFORD
COL, MS
Deputy Commander for Administration
   and Chairman

MELISSA A. FORSYTHE
MAJ, AN
Nurse Project Officer/Recorder

APPROVED/DISAPPROVED

THOMAS A. VERDON, JR.
COL, MC
Commanding

Schedule Name: Reynolds Army Comm. Hospital Phase I Transition Plan
Project Manager: CPT Ward/MAJ Forsythe 1-2815/3208//1-3522/5315
As of date: 5-Jul-88 7:51am   Schedule File: C:\TL\MACH1GRP

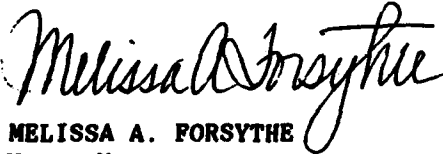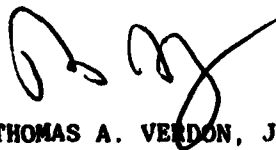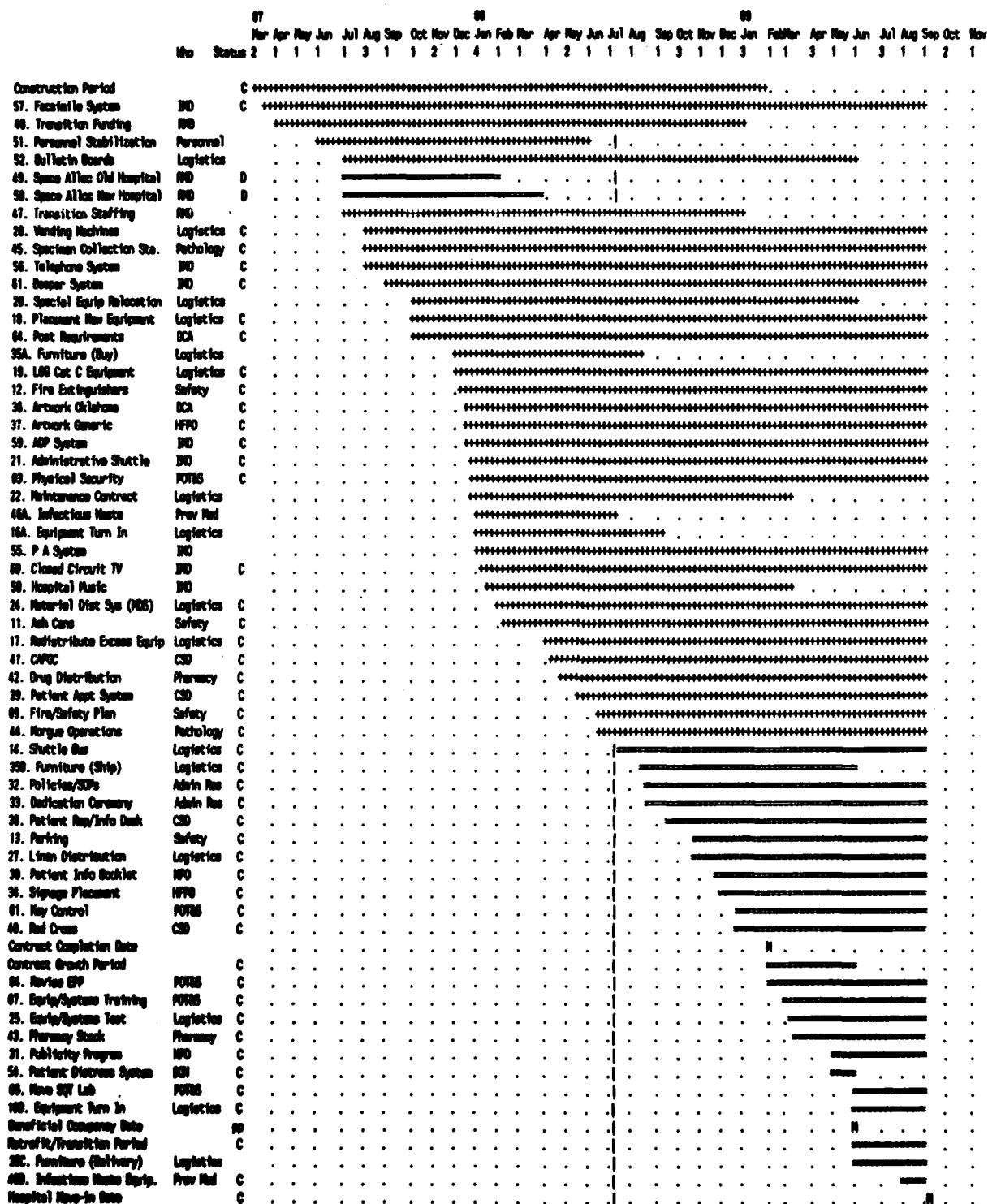|	Who	Status	87 / 88 / 89 timeline
Construction Period		C	
57. Facsimile System	DIO	C	
48. Transition Funding	DIO		
51. Personnel Stabilization	Personnel		
52. Bulletin Boards	Logistics		
49. Space Alloc Old Hospital	DIO	D	
50. Space Alloc New Hospital	DIO	D	
47. Transition Staffing	DIO		
28. Vending Machines	Logistics	C	
45. Specimen Collection Sta.	Pathology	C	
56. Telephone System	DIO	C	
61. Beeper System	DIO	C	
20. Special Equip Relocation	Logistics		
10. Placement New Equipment	Logistics	C	
64. Post Requirements	DCA	C	
35A. Furniture (Buy)	Logistics		
19. LOG Cat C Equipment	Logistics	C	
12. Fire Extinguishers	Safety	C	
36. Artwork Oklahoma	DCA	C	
37. Artwork Generic	HFPO	C	
59. ADP System	DIO	C	
21. Administrative Shuttle	DIO	C	
03. Physical Security	FORSC	C	
22. Maintenance Contract	Logistics		
46A. Infectious Waste	Prev Med		
16A. Equipment Turn In	Logistics		
55. P A System	DIO		
60. Closed Circuit TV	DIO	C	
58. Hospital Music	DIO		
24. Material Dist Sys (MDS)	Logistics	C	
11. Ash Care	Safety	C	
17. Redistribute Excess Equip	Logistics	C	
41. CAPOC	CSD	C	
42. Drug Distribution	Pharmacy	C	
39. Patient Appt System	CSD	C	
09. Fire/Safety Plan	Safety	C	
44. Morgue Operations	Pathology	C	
14. Shuttle Bus	Logistics	C	
35B. Furniture (Ship)	Logistics	C	
32. Policies/SOPs	Admin Res	C	
33. Dedication Ceremony	Admin Res	C	
38. Patient Reg/Info Desk	CSD	C	
13. Parking	Safety	C	
27. Linen Distribution	Logistics	C	
30. Patient Info Booklet	HFO	C	
34. Signage Placement	HFPO	C	
01. Key Control	FORSC	C	
40. Red Cross	CSD	C	
Contract Completion Date			
Contract Growth Period		C	
04. Review BPP	FORSC	C	
07. Equip/Systems Training	FORSC	C	
25. Equip/Systems Test	Logistics	C	
43. Pharmacy Stock	Pharmacy	C	
31. Publicity Program	HFO	C	
54. Patient Distress System	DOH	C	
06. New SOT Lab	FORSC	C	
16B. Equipment Turn In	Logistics	C	
Beneficial Occupancy Date		pp	
Retrofit/Transition Period		C	
35C. Furniture (Delivery)	Logistics		
46B. Infectious Waste Equip.	Prev Med	C	
Hospital Move-In Date		C	

B Base   — Task   - Slack time (——), or
C Critical   +++ Shared task   Resource delay (——)
R Resource conflict   M Milestone   > Conflict
p Partial dependency
Scale: Each character equals 1 week

TIME LINE Gantt Chart Report   Strip 1